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ABSTRACT

This book provides a picture of comprehensive children's services from a global, theoretical perspective, as well as a more practical guide to the potential roles for participating service providers and the structuring of such programs. Following an introduction, the volume is organized into 14 chapters: (1) "Moving from Cooperation to Collaboration for Improved Service Delivery for Children" (K. Whitaker and R. King); (2) "Coordinating Services for Children and Families: The Organizational Perspective" (B. Intriligator); (3) "Constructing a Multicultural Framework for Coordinated Children's Services" (B. Fennimore); (4) "The Organization of Family-School Interactions: A Prelude to School-linked Services" (C. Smrekar); (5) "Professional Attitudes, Judgment, and Confidentiality: Tensions in School-linked Services" (M. Manley-Casimir and M. Hall); (6) "Financial and Economic Policy Issues in Coordinated Children's Services" (J. Ward); (7) "A Look Back to the Futures of Children: Developing a Shared Vision of Early Intervention" (R. Brinker); (8) "Educators Respond to New Jersey's 'One-Stop Shopping' Program" (R. Knowlton and E. Tetelman); (9) "Administrative Issues in Coordinated Children's Services: A Chicago Case Study" (M. Smylie, R. Crowson, and V. Chou); (10) "Children's Services and Urban Teacher Education: Beginning the Conversation" (M. Bay, S. King, and V. Chou); (11) "The Principal's Role in Comprehensive Student Services for Empowerment of Students and Families" (C. Capper); (12) "A Social Work Perspective on Comprehensive Children's Services" (S. Goren and L. Afable); (13) "A Primary Health Care Perspective on Comprehensive Children's Services" (S. Girouard and J. Igoe); and (14) "Evaluation of Coordinated Children's Services: A Collaborative, Participatory Approach" (R. Levin and J. Greene). (LL)

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Professionals in a Comprehensive Services Model

Rebekah A. Levin,
Editor

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Rebekah A. Levin, Editor
University of Illinois at Chicago

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Dedicated in memory of
Richard P. Brinker
who devoted his life to improving
the lives of children and their
families in the inner-city.

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Introduction

Children have been receiving services in schools for many years that go beyond what is thought of as the traditional fare of reading, writing, and arithmetic. The school nurse, social worker, psychologist, and a myriad of specialists ranging from speech therapists to guidance counselors have long carried out their separate functions within schools, each working to enable students to be healthier, better adjusted, and more successful in their endeavors.

So why the need for a book about coordinated children's services? Perhaps a more appropriate first question is "What makes this generation of children so different from all other generations?" What makes them different is the environment into which they have been born and in which they must survive. The rates of poverty, crime, substance abuse, and unemployment have increased dramatically over the last 20 years, leaving many families unable to cope with the multiple demands and stressors they face. Many children come to school hungry, sick, and unprepared to learn, their parents lacking the resources to support them academically, physically, or emotionally. Furthermore, as the middle class has fled the cities to escape the poverty around them, the social and economic isolation of the lower-income individuals and families who remain has become more acute.

As the primary institution outside of the family with the responsibility of educating and socializing our children, schools have had to respond to ever-increasing needs of students and their families while resources have become more scarce. Class sizes are larger, supplies are at a minimum, support staff (nurses, social workers, and others) are spread across more than one school with time for little more than crisis management activities, and buildings are dilapidated with few funds available for their repair.

Teachers and principals can no longer hope to meet their students' multiple needs using the traditional model of service provision. In that model, students' needs, often experienced as problems or crises, are addressed in isolation from one another. There simply are not enough resources available and the problems and their complexity are increasing. Similarly, support staff are finding that their previous methods of addressing the needs of the school

children and their families are insufficient to the level and extent of demand for their services, both directly from the students/families, and from the teachers and principals with whom they work.

In response to this situation, a growing number of schools are implementing service provision programs based on a model of collaboration between the individuals and organizations that provide services for children. It is their hope that in coordinating their efforts, and in some cases creating mutually determined goals for their programs and activities, the needs of a greater number of children and their families will be addressed in more effective ways. Many of these programs are also based on the notion that if children's needs are seen in an ecological framework, recognizing the interconnectedness of the multiple facets of their lives and the power of addressing them as whole individuals, rather than as fragmented consumers of service, the efforts to meet these needs are likely to be far more successful (Melaville & Blank, 1991).

It is our hope that this book will help teachers, administrators, and teacher educators, providing a picture of comprehensive children's services from a global, theoretical perspective, as well as a more practical guide to the potential roles for participating service providers and the structuring of such programs. The volume is organized with the first chapters addressing broad issues related to comprehensive children's services, followed by a series of chapters that deal with the unique perspectives of participants in these endeavors.

In the first chapter, Whitaker and King examine interagency activities that take place when providing coordinated children's services, in light of the concepts of cooperation, coordination, and collaboration. These styles of interaction are then illustrated with examples of interagency collaborations, highlighting benefits to organizations and the barriers that often keep collaborative agreements from being successful.

The following chapter examines interagency arrangements to coordinate children's services. Intriligator outlines the interagency conditions and relationships that characterize the various arrangements and identifies the features that can sabotage effective interagency efforts and successful strategies for addressing the problems.

In her chapter, Fennimore addresses the issue of coordinated children's services in light of the need for a multicultural rather than deficit-based framework. Multiculturalism is presented as a reform process that aims to create an educational and social environment for equitable treatment of a wide range of cultural groups. In addition to the theoretical framework, Fennimore outlines specific actions that can be taken by those implementing coordinated children's services to ensure a multicultural approach is in place.

The organizational conditions and social processes related to the family-school interactions necessary to promote school-linked social service systems are the foci of the following chapter. Smrekar outlines policy proposals to link

schools and social services, which take into account the nature of family-school interactions.

In the following chapter, Manley-Casimir and Hall address some of the tensions for school administrators and teachers in dealing effectively with the array of comprehensive school-linked children's services and the new and perhaps problematic relationships they entail.

Ward then addresses many of the major policy issues related to the financing of coordinated children's services, such as the costs of providing the services as well as sources and mechanisms of funding. This chapter also raises questions concerning the effective, efficient, and equitable distribution of such resources.

In his chapter, Brinker examines two programs that attempted to integrate services to preschool-age children. Although he sees schools, families, and communities as necessary participants in the design of comprehensive children's services, Brinker's case studies provide a helpful reality-check of features of the interagency planning process that can undermine the creation and implementation of a shared vision.

The following chapter by Knowlton and Tetelman examines a statewide program to address the needs of children and their families by bringing together the resources and strengths of both schools and communities. The 4-year old program is described in detail, with attention to the factors that appear to contribute to its success.

Through an examination of a major coordinated children's service project within four of Chicago's public schools, Crowson, Smylie, and Chou raise a number of administrative issues and challenges. They also explore factors that hamper projects of this nature to integrate successfully into the host schools' cultures and operating procedures.

Bay, King, and Chou's chapter focuses on teacher preparation programs, considering ways curricula can be developed or expanded to incorporate issues and challenges facing teachers who work in an urban setting. They argue that the inclusion of materials and experiences about the many services available to youth and their families will help these future teachers be more effective educators because they understand the needs of urban youth and their communities.

In Capper's chapter, three perspectives on coordinated children's services are presented, each perspective embodying a different set of assumptions about the role of student services in a school or community. These perspectives carry different roles for and demands of principals, whose students stand to benefit from the provision of multiple services. Capper also addresses the training needs of principals, which vary depending on the coordinated children's services perspective chosen.

In the following chapter, Goren and Afable discuss the role of the school social worker, one of the individuals who frequently coordinates multiple services for students and their families. They describe the roles traditionally

carried out by school social workers as well as guidelines for involving social workers in further collaborative efforts to support students' educational experiences.

Girouard and Igoe address the role of primary health care within comprehensive children's services, discussing the need for more closely linked school and community health efforts. They also set forth a series of predictions about the possible impact for education if primary health care becomes an integral component of comprehensive children's services.

Finally, Levin and Greene's chapter looks at the evaluation of coordinated children's services, presenting a collaborative, participatory model designed to involve diverse stakeholders in the creation and gathering of meaningful knowledge and to facilitate its use in understanding and improving programs.

We are including the addresses of each of the authors in this volume to encourage a dialogue about coordinated children's services. For most of us, our work in this area is very much in process and we would like to hear your feedback as well as learn from your experiences.

Rebekah A. Levin

Endnote

Melaville, A. I., & Blank, M. J. (1991). *What is takes: Structuring interagency partnerships to connect children and families with comprehensive services.* Washington, DC: Education and Human Services Consortium. ED 330748

I

Moving from Cooperation to Collaboration for Improved Service Delivery for Children

Kathryn S. Whitaker
Richard A. King

Schools in large and small districts throughout the nation are joining forces with various public and private agencies to address the significant problems faced by families and children. Schools alone cannot solve the social ills of society, just as human service agencies alone cannot resolve these difficult problems (Liontos, 1990). One promising answer to these critical social issues is collaboration among agencies that serve children and families. Both demographics and financial considerations support collaboration. As Hodgkinson (1989) suggests, we simply must get more mileage out of the resources and organizations that are currently in existence.

Interagency collaboration provides a structure for bringing together a broad range of professional expertise on behalf of children and families. Once-fragmented service agencies can work closely to coordinate existing services and reorganize available resources to create more effective prevention, treatment, and support (Melaville & Blank, 1991). This concept offers opportunities for school systems as they integrate educational programs with mental health, juvenile justice, family services, homeless shelters, drug rehabilitation, and other agencies. Some of the goals of interagency collaboration include improving student achievement, parent literacy, and health care, while simultaneously reducing dropout rates, teen pregnancy, child abuse, criminal behavior, and drug and alcohol dependency.

A growing number of projects around the nation have reconceptualized the purposes of organizations participating in interagency initiatives and have overcome barriers such as fragmented service systems and isolated professional staff (Gardner, 1990; Kirst & McLaughlin, 1990; Melaville & Blank, 1991). Studies document the positive effects of collaboration on the success of the child, especially in terms of student achievement (Rosenholtz, 1989; Handel, 1990). Because of the potential for improving student outcomes, and because of their continuing contact with children and youth, schools can play an

important role in providing "integrated case management" and serving as "hubs" of social service delivery systems (Kirst & McLaughlin, 1990).

In this chapter we review the concepts of cooperation, coordination, and collaboration as they relate to interagency activities. A discussion of two ongoing interagency collaboratives points to benefits for organizations and the barriers that often keep collaborative agreements from being successful.

Collaboration Demands More Than Cooperation and Coordination

Institutions have coordinated efforts over the years in many different ways as they have formed partnerships, consortia, and collaboratives. Linkages between agencies have shifted from cooperation to coordination to collaboration. The three terms have often been used interchangeably (Hord, 1980), although the literature points to differences between the concepts. It is clear from the literature that "collaboration" among organizations requires more than what has occurred traditionally when autonomous institutions "cooperate."

In a cooperative effort, partners help each other reach their distinctive organizational goals. Strategies of cooperative relationships often include networking, information sharing, and assessments to determine community needs and to identify overlapping services (Melaville & Blank, 1991). However, cooperating agencies do not make substantial changes in the basic services they provide or in the rules and regulations governing their agencies. In a cooperative effort, financial and human resources are generally not shared among agencies and there may be duplication of effort and waste of resources (Hord, 1986).

Coordination is a more formalized process of using existing resources through the interaction of two or more organizations (Black & Kase, 1963; Halpert, 1982). Many efforts at coordination are based on organizational exchange theory, in which two or more organizations voluntarily exchange services such that each can more effectively reach stated goals (Levin & White, 1961).

Interagency collaboration is dramatically different. Collaboration seeks to establish a vision and shared goals about how to address problems of children and families. For collaboration to be successful, participating organizations should first recognize that a situation or problem exists and reach consensus on its nature and scope (Caruso, 1981). There is also a transition in thinking from a competitive value system to a collaborative one (Appley & Winder, 1977) as participants agree to plan jointly, implement, and evaluate new services to identify and meet families' needs more effectively.

> The advantage of collaboration over cooperation is the possibility it affords to restructure the expertise and resources of partner agencies and design and deliver services that are developmental rather than remedial in philosophy, preventative rather than merely corrective in approach, and centered on the total needs of the family and child. (Melaville & Blank, 1991, p. 18)

Mocker, Martin, and Brown (1988) state that collaboration derives from the notion that organizations come together for the purpose of solving problems of mutual concern. Whereas cooperation does not have "enlightened self-interest," collaboration does. "Collaboration works best when all institutions proceed on the basis of enlightened self-interest" (p. 45); that is, participating agencies must see that it is in their own best interest to collaborate. If organizations did not collaborate, the result would be diminished goals and objectives. Enlightened self-interest provides the motivation to collaborate.

While collaboration encourages the value of interdependence, cooperation promotes the value of autonomy among society's institutions. Boundaries among agencies disappear when there is a sharing of authority with regard to decisions about appropriate services for children and a pooling of human and financial resources to meet their needs. Expectations placed on participating people and organizations are more demanding in a collaborative effort. If the promise of strengthening the capabilities of formerly independent organizations to improve conditions for children and families is realized, then the outcomes of collaboration will be worth the sacrifice of autonomy.

The National School Boards Association ([NSBA], 1991) encourages collaboration to enable two or more parties with similar or overlapping objectives to reach goals they could not achieve acting alone. This kind of collaboration goes beyond communication and coordination: "*Communication* involves providing more complete information, but does not require any interaction among agencies. *Coordination* implies joint activity, but does not require participants to share a common goal" (p. 4). Hoyt (1991) conceptualizes collaboration as a sharing of responsibility, authority, and accountability:

> To the extent that educators and individuals from the private sector are to share responsibility for helping pupils, they must also share authority. To the extent that they share authority, they must also share accountability. This three-way sharing is what I have called "collaboration." (p. 451)

Rather than compete for societal support, it makes sense for a number of agencies to share resources and information about families and children. As individual agencies yield identities and control over resources, boundaries

disappear or become more permeable, depending on the nature of the new organization created (Schopler, 1987). Interagency collaboration challenges organizations, including schools, to embrace a different paradigm as they part with traditional structures that represent fragmentation, bureaucracy, and duplication.

Kirst and McLaughlin (1990) propose that public schools, in order to survive and become more efficacious, become a hub or nexus of comprehensive services to children. The National School Boards Association (1991) argues that schools are an "integral component in many successful collaboratives" since they are the most accessible, appropriate, and accountable institutions in children's lives (p. 3). Schools are politically and philosophically the right arena for collaboration. Children's learning benefits directly from adequate social services and suffers when services are not forthcoming. Schools have a vested interest in improving conditions that affect learning if they are to be held accountable for academic achievement and preparation for the workplace. Guthrie and Guthrie (1991) discuss the challenge of reconceptualizing the role of the school and its relationships with community agencies: "The new arrangement must be designed so that it shifts the emphasis of each agency away from itself and toward the client: the child" (p. 17).

The Education and Human Resources Consortium (see NSBA, 1991) proposes five key elements for a collaborative to be successful: (1) a wide array of services to address the complexity of problems, including prevention, treatment, and support services; (2) techniques to ensure that children and families who need services actually receive appropriate support; (3) a focus on the entire family; (4) a commitment to empowering families, actively involving them in identifying services they need and determining approaches that will be most successful; and (5) changing evaluation measurements, shifting from measuring the number of clients and other inputs to measuring such outputs as skills attained and student placement in jobs.

The second of these five requirements has been realized through three primary models for linking agencies and bringing services closer to children and families (Guthrie & Guthrie, 1991; NSBA, 1991; Melaville & Blank, 1991). In one approach, social service agencies house one or more branch offices in other locations including schools. A second model calls for a single case manager or professional coordinator to work with a given family and assume the primary responsibility for identifying and coordinating services. In the final model, similar to the two cases described in this chapter, a school or other single location selected for easy access and close coordination becomes a broker for collaborative supports and services. Heleen (1990) describes the role of a broker as "putting the pieces of the puzzle together by making crucial services more accessible to children and their families" (p. 19).

Initiating and implementing interagency collaboratives are not easy tasks. Collaboration requires new purposes, new roles and responsibilities, and

improved communication among organizations. In addition, sharing and stretching limited financial resources becomes difficult at best.

Two Cases

Center Project, Colorado

This understanding of interagency cooperation, coordination, and collaboration from the literature framed a recent investigation of an interagency linkage in Colorado (Boyd, 1991; Duning, Hetzel, & Patrick, 1991). Examining documents and interviewing people within and outside of the project provided a perspective on the benefits and difficulties associated with interagency collaboration. An examination of a school-based collaborative in San Diego, California, also provided insights toward a better understanding of the benefits and limitations involved in creating and maintaining collaborative arrangements.

The collaborative chosen for investigation in Colorado was the Center Project, located in Lake County. The highest unemployment rate in the state following a large-scale layoff of mine workers, a sharply reduced assessed valuation of property during the 1980s, a high percentage of children from low socioeconomic status families, and the highest school dropout rate of any rural district in the state characterizes this county (McCabe, 1989). In facing this crippling economic situation, the Center Project was founded on the belief that coordinated efforts would best address the problems of children at risk and children from economically depressed families. Although it was established by the Board of Education as a self-funding enterprise of the school district, the center has its own governing board of directors consisting of the superintendent, a parent, a school board member, a professional educator from outside the district, a member chosen at large, and a member representing the interests of children with handicaps.

The Center Project provides preschool, day care, before- and after-school and summer programs; cooperates with other agencies to offer prenatal care, a young mothers program, teen pregnancy intervention; provides offices for child and family counseling; and works with an area college to improve skills for people working in such programs. The project involves the following organizations: the school system, the county health department, the social services department, a local college, and a rehabilitation center. It also works closely with several other entities including Head Start, the county library, an intermediate unit, and the state education department.

This nationally recognized interagency activity was in its third year of operation at the time of the case study. Ethnographic research methodologies (Goetz & Lecompte, 1984; Wolcott, 1988) guided the examination of documents related to the project, including a historical description of its formulation and

first year of operation (McCabe, 1989). Semistructured interviews with key participants in the agencies, school district personnel, and parents associated with the center provided additional data.

New Beginnings Project, California

A very different setting from the small mining community is represented in the second collaborative. The New Beginnings Project in San Diego, California, was initiated in 1988 when executives from the City and County of San Diego came together to share information about services offered to children and families (Levy & Shepardson, 1992). Representatives of the Departments of Social Services, Health, Probation, Police; the Juvenile Court; the superintendent of schools; the San Diego Community College District; Parks and Recreation; the library system; and the city manager participate in this initiative.

In the New Beginnings Project, Hamilton Elementary School, a four-track school with 1,400 students, was chosen as a demonstration center. The center offers parent education classes, adult education classes, health care services, and counseling. The governing body for this project commissioned a study to assess the effectiveness of services in meeting the needs of the neighborhood surrounding Hamilton Elementary School (Melaville & Blank, 1991). Information gathered through interviews and data provided by case management services revealed (1) the extent to which families in this neighborhood received services; (2) the relationship between the use of services and children's school success; (3) the barriers to effective service delivery perceived by families and agency personnel; and (4) whether a more responsive, integrated, and cost-effective system could be created (p. 14).

Benefits Derived from Interagency Collaboration

Several benefits of interagency collaboration are documented in both the Colorado and California projects. Personnel in both projects cite improved social service delivery for children and families. There were also improved student outcomes, improved collegiality, and greater professional satisfaction among agency personnel.

Improved Support for Families and Children

Agency personnel and parents of children receiving services identified a number of successes of the Center Project in Colorado. Managers and staff of the participating agencies reported improved services to clients. Interviewees felt that the shared understanding of the functions and operations of other organizations led to increases in referrals among participating agencies. Enhanced performance was defined in terms of a larger number of individuals

served, new services made available, and increased efficiency of services delivered. Families and the larger community benefitted from newly unified services and enhanced support systems. By enabling parents to return to work through a quality day-care provider, there was a reported reduction in the number of people receiving Aid to Families with Dependent Children (AFDC).

Parents also perceived positive results for their children. They cited gains in social interaction skills, oral language development, decision-making ability, self-esteem, responsibility, good health habits, and readiness for educational advancement for their children. These parents agreed unanimously that children from a cross-section of economic backgrounds benefitted from the center's services.

In addition to the gains made by children, positive effects were seen by other family members as well. Parents reported a sense of freedom and security, peace of mind, and self-confidence. In large part these feelings resulted from the trust they developed in the center staff, who were described as caring about children, responding to parent's desires, communicating effectively, and creating an open, friendly environment. Several parents commented that feelings of security allowed them to work and pursue personal growth opportunities.

Although evaluation data on the New Beginnings Project are limited, the project offers improved services to children and families. A team of family services advocates who came from a variety of participating agencies provides comprehensive case management. Families are able to obtain ongoing counseling and referral to education, social, and health services. Mental health counseling and some health screening and treatment are also available.

Enriched Professional Relationships

Several benefits are derived from greater collegiality between agency personnel in the New Beginnings Project in San Diego. For example, the school district now receives data electronically from the Department of Social Services in order to establish elegibility for free lunches for AFDC families. This process eliminates duplication at the school level and saves staff time. Through improved collegiality, five agencies involved in the project developed a statement of common philosophy and agreement for shared governance. The Executive Board for New Beginnings rotates sites for monthly meetings as well as changes chairs for each meeting. This method prohibits any one agency from thinking it owns the process. In addition, the school district and the Department of Social Services joined to create instructional modules for parents to promote positive interactions with school staff and to help their children achieve success in school (Jehl & Kirst, 1992).

There are also reports of improved professional satisfaction from agency personnel in the Colorado project. Not only was there a sense of improved

social services for the community, but doing a better job was cited by many agency personnel as a source of job satisfaction. Agency personnel further reported greater insight into program development processes and heightened sensitivity to the importance of working in partnership with others. Some participants noted that people working together create a synergistic effect that is often stronger than the efforts of any one group. Success in the New Beginnings Project also reflected the importance of collegiality. These observations point to a move from autonomy to interdependence and from a cooperative model to a more collaborative one, at least in the view of agency personnel. These findings parallel Hord's (1986) observation that in a collaboration model a "we" process develops with system ownership, whereas in a cooperative model an "us/them" process mode emerges.

Stronger Effects on Individuals Than on Organizations

In the Center Project in Colorado, managers and staff of agencies involved in the collaborative interpreted change more in terms of personal effects and relationships among people than in terms of specific roles of participating organizations. Hall's (1987) research on change supports the notion that when a change is first implemented, oftentimes concerns rest with how the change will affect participants. In a new interagency agreement, individual concerns may arise such as, "How will my role change as a result of collaboration?" "Will I be able to understand my new role?" or "How do others in other agencies view me?"

Agency personnel in the Colorado project cited both positive and negative feelings as a result of interagency agreements. While citing a sense of personal threat, tension, and loss of personal creativity—natural feelings that would develop in any change process—personnel also cited feelings of connectedness, congeniality, and mutual appreciation as a result of new interagency agreements. While many agency personnel and school district employees had little knowledge of the roles and responsibilities of individuals in other agencies, the collaborative effort increased awareness and appreciation of other people with different roles. Changes in working conditions and roles and responsibilities were nearly always cast by staff in terms of the effect on their needs. Some personnel described changes as personally challenging or enabling, yielding feelings of increased self-confidence, respect, knowledge, and trust.

In both the California and Colorado projects, benefits were gained, not only for children, but for entire communities. Programs such as adult education classes, improved case management, high-quality child care, counseling, and health services provide rewards beyond those for direct beneficiaries. Hord (1986) indicates that in terms of rewards offered in a collaboration model, the public may gain greater benefit from the joint effort than any particular organization, especially in the case of public service organizations.

Overcoming Barriers

Several factors disrupt the collaborative process. Competition for funds, turf protection, unclear purposes and roles, fear of loss of organizational identity, differing interpretations of policies, lack of time, and differences in philosophical perspectives can be barriers to successful interagency collaboration (Kirst & McLaughlin, 1990; Lacour, 1982; Rogers & Mulford, 1982).

Several of these barriers surfaced in the Colorado and California projects. Effectively communicating with all parties, developing buy-in and ownership, establishing clear roles and purposes, and overcoming resource restrictions were issues to be resolved as the projects moved forward.

Developing Involvement and Ownership

In the Center Project in Colorado, potential participants were not all involved in the development and implementation of the project. Although the original idea for the collaborative came from the superintendent and a teacher in the school district, most teachers and administrators were not involved at the outset. Services were only offered at the center itself and not in any of the schools. Interviews revealed that teachers, especially at the secondary-school level, lack direct knowledge about center programs. This lack of awareness reflected a lack of buy-in and ownership. While the school superintendent had a vision for the project and shared it with other community agency personnel, the vision was not shared and developed with members of the school district as a whole. When vision is created at one level only, it is difficult to get people at all levels to implement programs effectively.

Involvement of middle management is crucial in the development of collaborative projects. School superintendents, board members, and other agency personnel cannot implement school-based services without involvement of middle management (Jehl & Kirst, 1992). Unlike the Colorado project, middle management in the New Beginnings Project provided on-going staff work and were involved in the formulation of the vision and mission of the collaborative from the outset. Principals involved in interagency collaboration must be active participants in the communication process. They serve as advocates for expanding the school role, promote involvement of other staff and community members, and play a key role in the link between teachers and staff members from other agencies (Jehl & Kirst, 1992).

The director of the Colorado project, a former teacher in the district, was vitally involved in all phases, but principals were minimally involved in activities of the Center Project. In contrast, the principal at Hamilton Elementary School in San Diego is a member of the New Beginnings Executive Committee and plays a vital role in contacting private and public agencies to serve Hamilton students. She also serves as an important link

between agency personnel and organizes parent meetings to solicit input about the project and its direction (Jehl & Kirst, 1992).

In addition to involving middle management such as principals, teachers need to be involved too. It became evident in the Colorado project that most teachers, other than the center director, were not involved in the initiation and implementation of the collaborative. As Jehl & Kirst (1992) maintain, teachers and support staffs need to be involved actively in needs assessments, adopting the philosophical base that supports the collaborative, and preparing for the working relationships among personnel in the various organizations.

In comparison, the New Beginnings Project involved teachers from the outset. Staff members from all the agencies met with teachers at Hamilton Elementary to discuss the needs of the families with whom they would be working. The discussions also centered around how to establish good working relationships with different agency personnel. There is a direct link between the New Beginnings staff and teachers of the four-track school through representation on a governance committee. Teachers from each of the four tracks select a team leader to represent them on the governance committee (Jehl & Kirst, 1992). This arrangement fosters communication among the organizations.

Developing buy-in and ownership with all stakeholders is crucial to effective collaboration. Collaboration requires organizations joining to accept ownership of the problems; if ownership is not shared from the beginning, collaboration will likely falter (Mocker et al., 1988).

Clarifying Roles, Responsibilities, and Purposes

Establishing clear purposes for the collaborative must be completed at the beginning stages of planning. The vision and goals for the collaborative must be developed and shared with all stakeholders, parents, agency personnel, and school district employees. It is important that staff involved in interagency agreements spend a considerable amount of time discussing purposes in the beginning stages. If clear purposes and goals are not decided upon at the outset, the collaborative will face problems that may not be able to be resolved later.

Clarity in roles and responsibilities of the various participating organizations is essential. Issues such as who provides which services, who provides case management, and how and to what extent resources will be shared must be decided. If personnel are shared among agencies, matters such as supervision and role specification, job descriptions, differential pay for similar work, and staff training and development need to be addressed. When agency personnel assume new or altered roles, provisions for staff training need to be built in.

Equity in roles and responsibilities is also important. Planning and implementation of the collaborative should not be dominated by one organization (Gardner, 1992); power and authority must be shared among participating organizations. If one organization is allowed to own the project, other agencies

may eventually drop out or not do their part in making the collaborative successful.

In the case of the Center Project in Colorado, the school district had distinct dominance over other agencies as evidenced by the governing structure and control of funding sources. Indeed, some perceived the center as a satellite program of the superintendent. In contrast, the New Beginnings Project gives evidence that no one organization dominates the collaborative agreement. The Executive Committee has representatives from all participating organizations, and the meetings and chair of the committee operate on a rotating basis.

Redirecting Scarce Resources

Scarce resources and turf protection are additional barriers to overcome when implementing interagency collaboratives. In the Colorado project, funding comes from several sources including the Colorado Pre-school Project, private grants and donations, and a portion from agencies involved. Although few funds come directly from the school district, several employees expressed fear that the Center Project was assuming a larger role and consuming more resources than traditional educational programs. One individual noted a suspicion that school funds were used to offset transportation and maintenance costs associated with the center. Some teachers stated that the new endeavor would require more money and more training in the future.

Several underlying reasons may account for the fears concerning resources. While the Center Project has grown, there has been declining enrollments and a shrinking tax base. In addition, the center has been the focus of attention, to the exclusion of the rest of the school district. Typical comments included: "we have funds for the center, but nothing for the rest of the district."

Resource allocation was also an issue in the New Beginnings Project. Data showed tremendous duplication and fragmentation of services between the Department of Social Services and the school district prior to the implementation of New Beginnings. In order to provide more flexibility, a new funding strategy was initiated. "New Beginnings redirects funds by repositioning employees from each participating agency to assume a portion of the overhead costs connected with the employees who are assigned to the Center" (Jehl & Kirst, 1992, p. 102).

Sharing and pooling resources and providing greater flexibility in how resources are used are key components for successful collaboration. Agencies must be equally willing to provide funding for a common mission to assist children and families. In addition, greater flexibility in funding allows services to be subcontracted in order to stretch scarce resources. Farrow and Joe (1992) suggest a strategy that includes new funding for additional staff and services, redeployment of existing funds, relaxing categorical requirements, and maximum use of Medicaid entitlement funds.

Conclusions and Recommendations

The two cases described in this chapter point to the value of strong interpersonal relations when establishing interagency collaboratives. Collaboration results from people and groups coming together from different backgrounds and disciplines to accomplish common goals. Individuals and groups may initially have agendas far apart, but the process for developing shared goals and a common vision provides a bridge to collaboration. This shared vision is possible if a framework has been established to promote trust and respect among participants. If a shared vision is not developed in the initial stages, cooperation among agencies rather than collaboration will likely be the end result.

Once created, the interagency effort demands that personal doubts and desires be put aside to accommodate untested working relationships. Accommodation to new ways of working requires risk taking that is perceived by staff members to be personal, not organizational. Team efforts, give and take, mutual respect, cooperative decision making, withholding judgment, and overcoming skepticism are important to collaborative work.

The initiation of such a far-reaching organizational change as that demanded by interagency collaboration requires that all agencies with a vested interest in defining the problem be involved from the beginning. Effective change strategies (Hall, 1987) help subordinates feel that they have a role to play and are needed. Our examination of two collaborative efforts suggest that later buy-in of the people within the organizations rests upon their sharing a vision and an understanding of the purpose of the collaborative.

If school systems and other agencies are to undergo a transformation in ways they operate and relate to one another, it is essential to involve school-based personnel in the process. The isolation of schools from the Center Project in Colorado contributed to negative feelings among many school personnel. Teachers, principals, and counselors, who have day-to-day contact with children, should be encouraged to interact with families and multiple service agencies about children's needs. Yet, as the Colorado case points out, school personnel are likely to be reluctant to be fully supportive of change efforts without a careful definition of expectations and resource use. Ascher (1990) echoes this conclusion, stating that the school organization proves problematic for service professionals. Kirst & McLaughlin (1990) recognize these issues in calling for the creation of incentives for teachers, changes in training of principals, and new programs in staff development. They argue, "Collaboration needs to penetrate the classroom and help students achieve academic success" (p. 87).

It may be that it is too soon to observe large changes in the schools as a result of the collaborative efforts described in this chapter. It appears, however, that the New Beginnings Project in California is closer to a collaborative model

than the Center Project in Colorado. Where more communication and involvement is prevalent among agency and school personnel in the California project, the isolation apparent in the Center Project makes it clear that a transformation has not yet occurred. The project has not changed the mission, educational goals, operations, or roles of most school personnel. There is, however, a linkage between the schools and the Center Project, but the superintendent is almost the sole agent of this linkage. The initiation and implementation of the Colorado project appears to be more top-down, where the initiation in the New Beginnings Project appears to be more bottom-up as evidenced by the early involvement of teachers, administrators, and other community and agency personnel.

Melaville and Blank (1991) advocate involvement of those who actually deliver the services at the earliest possible moment to ensure that the partnership exists in more than name only. It should not be assumed by administrators that personnel will automatically implement a new program. Unless participants are "fully involved in the partnership process, they have no real role to play [and] quickly lose interest" (p. 25-27). Gardner (1990) echoes this finding, "If the planning process is 'top to bottom' with no involvement by parents, teachers, and the youth themselves, then the community will not 'buy-in'—and the proposed plan won't reflect the community's true needs" (p.11). The above conclusion suggests that a true transformation cannot occur simply with a change in the operations of organizations; it must also occur in the minds of participants.

Involving parents may be crucial to improving their perceptions of the success of interagency collaboration. McLaughlin and Shields (1987) observe that low-income parents are not willing to serve on "paper councils," nor will they spend time in nonsubstantive roles. But schools can reach out and change relationships with low-income parents and communities in meaningful ways to improve students' academic and social success (Brooks & Sussman, 1990). As illustrated in this chapter, parents became involved in both the Center Project and New Beginnings. In the Center Project, parents have a visible presence on the Board of Directors, while extensive cross training for staff on how to work with parents from different backgrounds occurs in the New Beginnings Project.

We suggest that those who embark on collaborative activities do so with a strong emphasis on interpersonal relations. Establishing a high level of trust among participants, focusing on one's ability to do the job better, and an emphasis on personal feelings and personal accommodation to change are important elements for success. The significance of the way people, not organizations, view themselves in a collaborative project is central to the interpretation drawn from these cases, and may offer a promising direction for future research on distinctions between interagency cooperation and collaboration.

Helping People Adapt to New Roles and Responsibilities

Staff development is essential during the initiation of change from autonomous to interdependent organizations. If people experience changes required by interagency activities in personal terms, then planners should place an emphasis on the personal satisfactions and feelings of people involved in collaboratives.

Many staff members have been educated and trained in a system that promotes competition, rather than sharing and consensus building (Kagan, 1990). To overcome the prevalence of competitive value systems, staffs need to participate in extensive training to assist them in working with each other in a collaborative fashion.

Preparation for change can be facilitated by staff orientation sessions designed to acknowledge individual feelings and self-perceptions. These sessions need to provide opportunities for personnel to express personal doubts and to explain the basis of the personal satisfactions they can achieve through collaboration. Inservice training to assist staff in accepting new roles and responsibilities should focus, first, on changing attitudes and developing motivation to collaborate, and second, on building specific skills (Williams & Chavkin, 1986). After staffs have had opportunities and time to air concerns and feelings, they are more likely to benefit from training (Melaville & Blank, 1991). The sessions should also be led by professionals who can relate their own personal experiences in interagency work and assist staff in anticipating the personal challenges and benefits of such work.

Staff development should foster and support personal growth in self-confidence. It should stress the importance of mutual respect in collaborative decision making and the value of team efforts in an individual's ability to perform the job more effectively. Procedures that de-emphasize formal roles, while continually acknowledging, assisting, and accentuating the personal development and contribution of individuals to joint endeavors, will facilitate the movement from cooperation to collaboration.

Addressing Resource Concerns

From the case studies noted in this chapter, it is clear that a transformation from cooperation to collaboration is difficult without increasing human and financial resources. If schools are to become active and equal partners in interagency collaboration, it is the teachers who will have to bear the burden of change and be the ones who actually implement the transformation in classrooms. Many questions need to be answered in regard to control of resources. For example, where will the funds come from? Are agencies willing to redirect funds from existing services? Are administrators willing to share their dollars? Which organization receives funds that follow the child if services are shared? What is the role of legislatures, school boards, and other policy-making bodies in addressing such resource and control issues? (Farrow & Joe, 1992; Kirst & McLaughlin, 1990).

The acquisition and control of resources breed conflict and power struggles within and among organizations (Wildavsky, 1964). The issues and concerns surrounding resource acquisition and utilization are really issues of priority, authority, and control (Farrow & Joe, 1992). Because policies and regulations of current fragmented organizations are designed to protect autonomy, they often impede efforts to remove boundaries. Policies at the federal, state, and local levels that define and fund institutions; elegibility and target population requirements that isolate recipients; guidelines for budgets and program reports; supervision and evaluation methods; and structures that delineate salary and career development, all inhibit collaboration. Melaville & Blank (1991) observe: "The natural tendency of participants to maintain their distinctive organizational characteristics gives rise to 'turf issues,' which, in greater or lesser degree, many joint efforts experience" (p. 29). These resource concerns must continue to be addressed.

In summary, although there are barriers to overcome in collaborative activities, there is a tremendous need for true interagency collaboration among schools, social service agencies, businesses, health-related organizations, and other entitites. While cooperation among agencies involved in childrens' services has existed for some time, it is time to move toward a collaborative mode to provide more integrated and comprehensive services to children and families. By involving policymakers, school and agency personnel, and affected clients in all stages of planning and implementation, by recognizing the importance of strong interpersonal relations, by clarifying purposes and roles, and by addressing resource issues, the challenges of initiating and institutionalizing collaboratives might be eased—and collaborating organizations will more effectively address the needs of children and families.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Appley, D. E., & Winder, A. E. (1977). An evolving definition of collaboration and some implications for the world of work. *The Journal of Applied Behavioral Science, 13*(3), 279-90.

Ascher, C. (1990). *Linking schools with human service agencies.* (ERIC/CVE Digest No. 62). Washington, DC: Children's Defense Fund. ED 319877

Black, B. J., & Kase, H. M. (1963). Interagency cooperation in rehabilitation and mental health. *Social Service Review, 37*(1), 26-32.

Boyd, B. (1991, October/November). *The impact of interagency relationships on the educational institution: The Leadville Center Project.* Paper presented at the Annual Meeting of the Rocky Mountain Educational Research Association, El Paso, TX. ED 339090

Brooks, M. G., & Sussman, R. A. (1990). *Involving parents in the schools: How can third-party interventions make a difference?* Boston, MA: Institute for Responsive Education. ED 330465

Caruso, J. J. (1981, April). Collaboration of school, college, and community: A bridge to progress. *Educational Leadership 38*(7), 558-562. EJ 245691

Duning, B., Hetzel, R., & Patrick, S. (1991, October). *The Center Project: Transformational collaboration or managerial cooperation?* Paper presented at the Conference of the Northern Rocky Mountain Educational Research Association, Jackson Hole, WY.

Farrow, F., & Joe, T. (1992). Financing school-linked, integrated services. *Future of Children, 2*(1), 56-67. EJ 448072

Gardner, S. (1990). Failure by fragmentation. *Equity and Choice, 6*(2), 4-12. EJ 409731

Gardner, S. L. (1992). Key issues in developing school-linked, integrated services. *Future of Children, 2*(1), 85-94. EJ 448074

Goetz, J. P., & Lecompte, M. D. (1984). *Ethnography and qualitative design in educational research.* San Diego, CA: Academic Press.

Guthrie, G. P., & Guthrie, L. F. (1991, September). Streamlining interagency collaboration for youth at risk. *Educational Leadership, 49*(9), 17-22. EJ 432685

Hall, G. E. , & Hord, S. M. (1987). *Change in schools: Facilitating the process.* Albany, NY: State University of New York Press. ED 332261

Halpert, B. P. (1982). Antecedents. In D. L. Rogers, D. A. Whetten., & Associates (Eds.), *Interorganizational coordination* (pp. 54-72). Ames, IA: Iowa State University Press.

Handel, R. D. (1990, April). *Shared visions, double vision and changing perspectives: A college/school parent participation program.* Paper presented at the Annual Meeting of American Educational Research Association, Boston, MA. ED 319 833

Heleen, O. (1990, Winter). Community schools and service integration in New York. *Equity and Choice, 6*(2), 19-20. EJ 409734

Hodgkinson, H. L. (1989). *All one system: Demographics of education and service delivery systems.* Washington, DC: Institute for Educational Leadership. ED 312757

Hord, S. M. (1980, April). *Distinguishing between cooperation and collaboration: A case study approach to understanding their relative requirements and outcomes.* Paper presented at the Annual Meeting of American Educational Research Association, Boston, MA. ED 208470

Hord, S. M. (1986, February). A synthesis of research on organizational collaboration. *Educational Leadership, 43*(5), 22-26. EJ 334200

Hoyt, K. (1991, February). Education reform and relationships between the private sector and education: A call for integration. *Phi Delta Kappan, 72*(6), 450-453. EJ 421310

Jehl, J., & Kirst, M. (1992, Spring). Getting ready to provide school-linked services: What schools must do. *Future of Children, 2*(1), 95-106. EJ 448075

Kagan, S. L. (1990). The care and education of America's young children: At the brink of a paradigm shift. In F. Macchiarola & A. Gartner (Eds.), *Caring for America's children.* New York: Academy of Political Science.

Kirst, M. W., & McLaughlin, M. (1990). Rethinking policy for children: Implications for educational administration. In B. Mitchell & L. L. Cunningham (Eds.), *Educational leadership and changing contexts of families, communities, and schools.* 89th Yearbook of the National Society for the Study of Education (pp. 69-90). Chicago: University of Chicago Press.

Lacour, J. A. (1982). Interagency agreement: A rational response to an irrational system. *Exceptional Children, 49*(3), 265-267.

Levin, S., & White, P. (1961). Exchange as a conceptual framework for the study of interorganizational relationships. *Administrative Science Quarterly, 5*(4), 583-601.

Levy, J. E., & Shepardson, W. (1992, Spring). A look at current school-linked service efforts. *Future of Children, 2*(1), 44-55. EJ 448071

Liontos, L. B. (1990). *Collaboration between schools and social services.* ERIC Digest Series, Number EA48. Eugene, OR: ERIC Clearinghouse in Educational Managment. ED 320197

McCabe, J. R. (1989). *The Center Project: A one year history, 1988-89.* Leadville, CO: Lake County School District R-1.

McLaughlin, M. W., & Shields, P. M. (1987, October). Involving low-income parents in the schools: A role for policy? *Phi Delta Kappan, 69*(2), 156-160. EJ 359353

Melaville, A. I., & Blank, M. J. (1991). *What it takes: Structuring interagency partnerships to connect children and families with comprehensive services.* Washington, DC: Education and Human Services Consortium. ED 330748

Mocker, D. W., Martin, D. C., & Brown, N. C. (1988, April). Lessons learned from collaboration. *Urban Education, 23*(1), 42-49.EJ 372924

National School Boards Association (NSBA). (1991). *Link-up: A resource directory. Interagency collaborations to help children achieve.* Alexandria, VA: Author. ED 339782

Rogers, D. L., & Mulford, C. L. (1982). Consequences. In D. L. Rogers, D. A. Whetten, and Associates (Eds.), *Interorganizational coordination* (pp.32-53). Ames, IA: Iowa State University Press.

Rosenholtz, S. J. (1989). *Teachers' workplace: The social organization of schools.* New York: Longman.

Schopler, J. H. (1987). Interorganizational groups: Origins, structure, and outcomes. *Academy of Management Review, 12*(4), 702-713.

Williams, D., & Chavkin, N. (1986). *Teacher/parent partnerships: Guidelines and strategies for training teachers in parent involvement skills.* Austin, TX: Southwest Educational Development Laboratory.

Wildavsky, A. (1964). *The politics of the budgetary process.* Boston, MA: Little, Brown.

Wolcott, H. F. (1988). Ethnographic research in education. In R. M. Jaeger (Ed.), *Complementary methods for research in education* (pp. 187-249). Washington, DC: American Educational Research Association.

II

Coordinating Services for Children and Families: The Organizational Perspective

Barbara A. Intriligator

The Interagency Planning Process

There is a growing recognition by state and local service providers that the needs of at-risk children are not being adequately responded to by the existing service delivery system. These children often have complex and multiple needs that cannot be addressed by any single provider or agency. In order to obtain full services for their children, parents must identify and work with several agencies that often have different eligibility requirements and that rarely work together to provide their children with comprehensive services. In response to these problems, many providers are adopting collective strategies designed to eliminate such fragmentation and to insure that at-risk children and their families have access to coordinated ways to identify and address problems and needs.

Once the need for collective action is recognized, state planners usually establish an interagency committee, which is assigned responsibility for developing a coordinated service delivery program that is both responsive and accessible to children with special needs and their families. Participants on these interagency committees typically represent the service delivery specialty areas that have in the past provided services to the targeted population. In fact, these same individuals usually serve on several state-level interagency committees, which are formed to address needs of certain targeted populations. More often than not, participants experience frustration over these committees' seeming inability to create the needed services. Typically, participating agencies design a rather general interagency agreement that pledges agency support for coordinating service delivery for the client group in question. In practice, while these interagency agreements serve as a necessary first step, they do not lead to implementation of coordinated service programs in and of themselves. Agreements must be followed by energetic planning and development activities.

These difficulties with coordination that agencies face can be explained, at least in part, by the nature of the interagency planning processes that are used. Interagency planners begin by cataloguing existing programs and services and by identifying areas of duplication and gaps in services. Their expectation is that such information is sufficient for establishing coordinated programs for clients and their families. In effect, the primary focus of such an interagency planning process is the services and programs that need to be reorganized (Intriligator & Goldman, 1989). However, these steps are necessary but not sufficient for establishing coordinated service delivery system within projected time frames. There are countless examples of efforts to create collaborative service programs that have been delayed or have failed because a whole set of process issues were not addressed. (Baldwin, Intriligator, Jeffries, Kaufmann, & Walsh, 1991).

In addition to collecting information about existing programs and services, interagency planners must also design policies and procedures that will facilitate and support their collective actions. They must recognize that agencies involved in the interagency planning process are concerned with identifying those programs and services that will become the concern of the new collective unit as well as those that will remain within the prerogatives of the single agencies. They need to create an interagency structure that will have responsibility for managing the interagency service delivery system. They must also establish procedures for making decisions and resolving turf issues. Complicated as they are, such issues can be addressed by interagency planners in ways that facilitate timely implementation of new coordinated service delivery systems.

The organizational framework presented in this chapter provides interagency planners with ways to establish effective interorganizational processes that address these issues. It serves both as a guide to establishing new collective efforts and as a means of diagnosing problems with dysfunctional arrangements.

The Oganizational Framework

It is not unusual to find certain agencies and providers involved in several interagency initiatives, each one intended to address the needs of a specific client group or to accomplish a defined task collectively. The kind of organizational arrangement that needs to be established to accommodate these different types of initiatives varies according to the complexity of the task and the length of time needed to complete it.

Degree of Interdependence

There are several types of organizational designs that may be adapted to accomplish interagency objectives. Each requires a different degree of agency

interdependence in order to accomplish a particular collective goal. These organizational structures are classified as cooperative, coordinative, and collaborative interagency efforts. They vary in terms of seven critical features that represent those organizational conditions and interagency relationships that discriminate between effective and less successful initiatives to coordinate services for children and families (Goldman & Intriligator, 1988). They are depicted in the continuum below:

Continuum of Interagency Efforts

COOPERATION	COORDINATION	COLLABORATION
X	X	X
Independence		Interdependence

In some interagency arrangements, agencies remain autonomous, agreeing to work together only to accomplish a short-term, very focused goal such as sponsoring a joint conference. We call this kind of interagency effort cooperation. At the other end of the continuum, efforts to coordinate services for infants and toddlers with disabilities and their families and provide these multiply involved clients with a single point of entry into the service delivery system are examples of collaborative initiatives. They present unique challenges to involved partners that create a need to alter their operational routines in order to facilitate the development of redesigned or altered service delivery systems. Agencies will need to conduct their business differently—that is, to change the philosophical orientations that drive their services, to add additional atypical services to their current offerings, and to work together closely to organize and implement new service delivery systems and strategies.

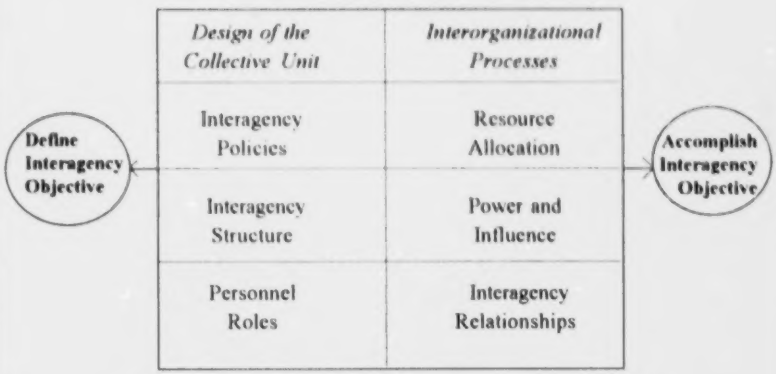
This kind of collaborative interagency arrangement is different from a cooperative effort. Agencies decide to relinquish some of their autonomy in terms of meeting client needs and they agree that a combined effort is likely to be much more successful than any single agency action. By and large, public service agencies are designed and organized to accomplish their objectives independently. Interagency efforts require more initial time and planning, as agencies establish those organizational conditions and interpersonal relationships that will support and enable the interagency effort to be successful. Moreover, collaboration requires a much more intensive effort by agencies than does cooperation or coordination. Therefore, it is important to establish the type of interagency arrangement that is most suitable to accomplish a particular initiative.

Agencies are most likely to attempt to accomplish initiatives together (1) when they involve activities or clients that are the responsibility of several agencies; (2) when single agency resources or expertise are inadequate to address the needs of a client or program; and/or (3) when formal policies and/or external mandates require that activities or services be coordinated (Intriligator, 1990b). The options available to agencies that have made a decision to accomplish some initiative collectively are numerous. Interagency efforts can be configured along the entire continuum portrayed above. Cooperation, coordination, and collaboration are each viable strategies for designing interagency arrangements. Decisions to use a particular approach are primarily dependent upon the nature of the objective that is to be accomplished.

The Framework

The concepts in the organizational framework constitute a set of conditions that must be addressed deliberately by state and local planners in order to establish supportive interagency arrangements. They include: (1) interagency objective; (2) interagency policies; (3) interagency structure; (4) personnel roles, (5) resource allocation; (6) power and influence; and (7) interagency relationships. These elements represent aspects of the design of an interagency unit and organizational processes that guide effective interagency unit operations. They are present in all state and local efforts to establish interagency approaches to service delivery and allow us to differentiate between cooperation, coordination, and collaboration—the three types of interagency efforts described above. Relationships between the seven concepts in the framework are depicted in the chart below:

Organizational Framework



The seven concepts in the organizational framework constitute the conditions needed to accomplish an interagency objective. They may be used to discriminate between effective and dysfunctional interagency efforts. The desired characteristics of each concept differ depending upon the degree of agency interdependence needed to accomplish a particular interagency objective. For example, interagency policies that support cooperative interagency efforts have different distinguishing characteristics than those policies that work in either coordinative or collaborative enterprises.

Interagency Objectives

The concept that drives the analytical framework is the interagency objective. Different interagency objectives require varying degrees of interdependence between and among participating agencies. These objectives are analyzed in terms of (1) the length of time that agencies will need to work together to accomplish a goal; (2) the complexity of the goal and the issues that it is intended to address; and (3) the extent to which the goal can be effectively addressed by a single agency rather than the interagency unit. These features of interagency objectives are depicted in the following chart:

Characteristics of Interagency Objectives

Characteristics	Cooperation	Coordination	Collaboration
Time	Short-term	Intermediate or long-term	Long-term
Complexity	Single task Routine/focused	Single, multifaceted Complex	Multiple tasks Complex
Single Agency Role	Task can be done alone or together	Task needs to be accomplished with other agencies	Tasks need to be accomplished with other agencies

When an interagency objective is characterized as collaborative, for example, planners must establish a set of collaborative conditions that enable the successful accomplishment of that objective. These conditions are the remaining six concepts in the analytical framework. In effect, the nature of the proposed interagency objective determines the degree of interdependence needed in each of the remaining six elements in the analytical framework.

The primary factor to consider in deciding whether to use a cooperative, coordinative, or collaborative interagency effort is the nature of the objective

that agencies wish to accomplish together. Each of the three interagency types is used to accomplish different kinds of interagency objectives.

Interagency Policies

Once an interagency objective is defined, planners must address issues related to designing the interagency unit. There are three concepts that discriminate between effective and ineffective designs of interagency arrangements: interagency policies, interagency structure, and personnel roles. Agencies participating in an interagency enterprise establish operating policies that delineate how the interagency unit will conduct its business. The absence of such policies usually impedes the ability of the interagency unit to accomplish its work efficiently and effectively.

A number of different interagency policies need to be formulated specifically to provide guidance for the new enterprise. These policies relate to management of the interagency unit and to delineating procedures that define the collective decision-making process within the interagency unit. Policies that an interagency unit formulates to support the interagency initiative vary, depending upon whether the interagency unit is cooperative, coordinative, or collaborative. These characteristics are depicted in the following chart:

Characteristics of Interagency Policies

Characteristics	Cooperation	Coordination	Collaboration
Management Policies	Not needed; single agency standard operating procedures are used	Management policies are defined in ways that are compatible with single agencies' policies	Management policies are defined, for the most part, in ways that are compatible with single agencies' policies Some changes in single agencies' operating procedures are made in order to implement interagency policies
Decision-making Policies	Not needed	Policies that delineate procedures for making decisions within the interagency unit are developed	Policies that delineate procedures for making decisions within the interagency unit are developed Policies that determine boundaries between the interagency unit and single agencies are defined

In effect, cooperative interagency efforts do not disrupt or interfere with standard operating procedures in the participating organizations. Moreover, these activities are accomplished on a one-time-only basis. Therefore, there is no need for agencies to create any interagency policy to guide the effort. On the other hand, collaboration always requires some modification in agency operating procedures, as well as the creation of new interagency policies that define the ways in which the collaborative interagency unit will operate. Thus, interagency policies need to be delineated that serve as guides to interagency decision-making and that define boundaries between the interagency unit and participating single agencies. Such interagency policies are used to provide direction for both planning and implementing interagency objectives that are to be accomplished collaboratively.

Interagency Structure

Interagency planning and actions require the creation of administrative structures to oversee and maintain the interagency effort. Decisions about the appropriate administrative setup for an interagency unit are influenced, in part, by the kind of interagency objective, by resource availability, and by the capacity of individual agencies to demonstrate risk-taking behavior. Planners need to design an interagency structure within which the interagency work gets accomplished. Typically, an interagency committee is used for this purpose, sometimes accompanied by creation of a new administrative unit, which functions as the operational arm of the interagency effort. Participating agencies decide the extent to which they wish to formalize the interagency structure and whether to grant it policy authority. In order to design the appropriate administrative structure for an interagency effort, agencies will need to address the following issues:

- What agencies, or units within agencies, need to be represented in the interagency unit as it develops policies and programs for the new initiative?
- Can the interagency objective be accomplished successfully using an existing unit for administration? Should a new interagency unit be created?
- What kind of administrative structure is necessary to enable the interagency effort to implement interagency policies effectively?

Different interagency administrative structures are suitable for cooperative, coordinative, and collaborative interagency efforts. In cooperative arrangements, administrative units do not need to be established. These interagency objectives are not complex enough, nor do they last long enough

to justify devotion of time and energy to the creation of an administrative unit. Rather, staff within each of the involved agencies are usually assigned administrative responsibility for cooperative interagency initiatives. In effect, the cooperative effort is a relatively minor piece of the cooperating agencies' regular business and assigned staff usually accomplish the interagency activity in addition to their other responsibilities.

Successful coordinative interagency efforts require the development of more formal administrative structures. These structures often take the form of a specially appointed interagency committee whose members represent the needs and interests of their home agencies as they develop and monitor the interagency effort. In effect, single agencies actually run the programs, while the committee coordinates single agency activities. Agencies retain the right to accept the recommendations of the coordinating council on a case-by-case basis. Ordinarily, staff are not assigned directly to the coordinative objective. As is the case with cooperation, staff associated with the interagency initiative are employees of the involved organizations and are primarily responsible to their home agencies for activities related to the interagency effort. Features of structures that are used by interagency efforts are depicted in the following chart:

Characteristics of Interagency Structure

Characteristics	Cooperation	Coordination	Collaboration
Complexity	No interagency structure is needed	An interagency structure is necessary	A more complex interagency structure is necessary
Degree of Formalization	Minor initiative for single agencies	Relatively minor initiative for single agencies	Major initiative of single participating agencies
	Task assigned to single agency staff	Function(s) assigned to interagency unit	Function(s) assigned to interagency unit
Policy Authority	Agency autonomy not affected	Agencies maintain autonomy, while agreeing to support the collective effort	Agencies relinquish some autonomy to the interagency unit
	No interagency policy decisions	Interagency unit recommends policies for the interagency effort	Interagency unit makes policies for the interagency effort and unit
Staffing	No interagency staffing needed	Staffing of interagency unit is helpful but not required	Staffing of the interagency organizational unit is required
	Tasks completed independently by the single agencies	Tasks completed by single participating agencies on behalf of the collective objectives	Tasks completed by the interagency unit on behalf of the participating organziations

Accomplishment of collaborative interagency objectives is dependent on the development of an appropriate administrative structure that can support and facilitate the interagency initiative. This interagency structure may take the form of a new unit established expressly to support the collaborative interagency effort, and/or an interagency council with representation from all involved agencies. The interagency unit must demonstrate its ability to respond to client needs responsibly, as well as to respect the individual concerns of the participating organizations. When the interagency unit develops that capacity, individual agencies will allow it more latitude to influence the individual agencies' dealings with the targeted population. Staff are assigned directly to the new unit and the collaborative effort becomes their primary responsibility. Accountability for operations rests primarily with the collaborative unit rather than with the individual agencies. In effect, the involved single agencies grant the interagency unit the authority to make decisions about the planning and operation of the collaborative enterprise.

Personnel Roles

Successful interagency efforts are largely dependent upon the roles that involved individuals play in both the planning and implementation of the collective enterprise. Individuals involved in an interagency effort have a number of responsibilities that they must meet in the roles that they are assigned. These personnel may find themselves in the position of having to reconcile the expectations of their home agency roles with the expectations of the interagency enterprise. Thus, interagency planners must define roles and responsibilities for accomplishing their work in ways that are acceptable to the involved agencies.

Personnel whose primary function is to represent their individual agencies' interests implement cooperative interagency efforts. They are assigned responsibilities for accomplishing the interagency task on a short-term basis. Their supervisors usually consider that their involvement in the interagency effort is a part of their regular responsibilities. Because the interagency effort is a very minor part of the business of the agencies involved, persons carrying out the interagency responsibilities are not confronted with situations in which they must reconcile key single agency concerns with interagency needs.

The roles of personnel assigned to coordinating units are more complex. Coordinative interagency arrangements are structured so that interagency activities are accomplished by involved single agencies and responsibility for coordination of individual agency activity is assigned to an interagency council. Individuals within involved agencies who are selected to implement the interagency initiative already hold responsible positions in their agencies. While they may be relieved of some of their existing duties, they usually find that the interagency work imposes an additional burden for which they do not receive any compensation. At the least, single agencies need to convey to these

personnel that time and energies devoted to interagency work are valued by the agency and will be suitably rewarded when personnel are reviewed and next year's salaries determined.

Key personnel from each involved agency are appointed to the interagency council as representatives of their agencies' positions, needs, and concerns. When serving in this capacity, these agency representatives must have the authority to speak for their home units and to commit resources to the interagency effort on behalf of their own agencies. Appointment of persons to the coordinating council who have less responsible roles serves to delay the work of the interagency unit. Interagency policy issues are decided by personnel whose primary function is to represent their individual agencies' interests in the coordinative arrangement. At the same time, these individuals often become invested in seeing that the interagency objective is accomplished successfully. Therefore, they find themselves in the position of also having to represent the concerns of the interagency effort to their home organizations. Often, these two roles are not completely compatible. It is not unusual to find single agency representatives on an interagency council, who have a professional commitment to the targeted client group, becoming advocates of the interagency activity and seeking additional contributions from their home agencies for the coordinated activity at the same time as their agencies expect them to monitor, and perhaps contain, agency involvement in the interagency enterprise.

The roles of staff in collaborative interagency efforts differ in some aspects from the roles played by individuals in cooperative or coordinative interorganizational arrangements. Collaborative efforts are carried out by personnel who are responsible to their individual agencies as well as for the interagency effort. Those who work in the collaborative unit tend to become a close-knit work group, willing to share necessary information among themselves.

Collaborative units must have sufficient staff to accomplish their objectives. They also require as directors persons who are comfortable with exercising leadership in a highly political, ambiguous environment where the need to provide vision to the collaborative enterprise is as important as the ability to administer daily operations. Personnel assigned to work for the collaborative enterprise obtain their power to act and make decisions from the collaborative itself through the policy board, as well as from the individual agencies.

In addition to staff, collaborative units have policy boards that are primarily composed of representatives of participating single agencies. These individuals have a responsibility to oversee the interagency initiative in order to ensure that interagency activities are successful. At the same time, they are employees of their home organizations and are expected to protect their own organizations' interests. In successful collaborative initiatives, policy board members

become advocates of interagency objectives in their home organizations and actively inform and involve other appropriate persons and units in the accomplishment of the collaborative's activities. The more informed and involved single member agencies are, the more likely that the collaborative unit will receive the single agency support needed to implement its interagency objectives successfully. Features of personnel roles under each of the three stages of interdependence are presented in the following chart:

Characteristics of Interagency Personnel Roles

Characteristics	Cooperation	Coordination	Collaboration
Actors	No interagency council members	Interagency council members guide the interagency effort	Interagency council members serve in policy guidance roles
	No interagency staff are needed	Interagency staff are helpful, but not needed	Interagency staff are necessary
Primary Functions	Interagency tasks done by single agency personnel	Council members represent home agency interests only	Council members represent both home agency and interagency unit interests
	There are no interagency staff	Interagency coordination accomplished by the interagency unit	Interagency tasks and collaboration completed by the interagency unit
Loyalty	Loyalty to the interagency effort is unnecessary	Council members demonstrate loyalty primarily to their home agencies	Council members demonstrate loyalty both to their home agencies and to the interagency unit
	There are no interagency staff	Interagency staff demonstrate loyalty to the interagency unit	Interagency staff demonstrate loyalty to the interagency unit

It is as important to establish supportive interorganizational processes as it is to design interagency policies, structures, and personnel roles that are compatible with accomplishment of the interagency objective. These processes delineate how participating agencies relate to each other, and therefore whether or not they will be able to accomplish the interagency objective collectively. The three concepts in the analytical framework that relate to establishing appropriate organizational processes that guide interagency unit operations are resource allocation, power and influence, and interagency relationships.

Resource Allocation

The nature and source of the resources provided to support the interagency effort are other features that discriminate among the three kinds of interagency arrangements. Sufficient resources need to be assigned to the interagency effort to enable successful accomplishment of the objective. Most likely, resources will be obtained from single agency budgets, special state and local allocations and, where appropriate, from federal appropriations. Acceptable agency resource contributions to interagency efforts include personnel, programs, facilities, and monies. While agencies identify sources of funds needed to support the interagency effort, they also determine how these resources will be allocated. Agencies agree upon and define procedures that the interagency unit will follow as it receives and distributes resources intended to support implementation of the interagency objective. Characteristics of resource allocation procedures in interagency efforts are depicted in the chart below:

Characteristics of Interagency Resource Allocation

Characteristics	Cooperation	Coordination	Collaboration
Frequency	Provided on a one-time-only basis	Provided annually; new allocations re-revaluated annually	Provided over an extended period of time
	No pooling of resources	Minimal pooling of resources	Interagency resource pool is established
Sources of Funds	Single agency discretionary money	Single agency annual budgets	Single agency annual budgets
	No additional agency resources are needed	Additional agency resources are provided for implementation	Additional agency resources are provided for implementation
	External funds are needed rarely	External funds are often obtained	External funding or special resource allocations are usually necessary

Garnering resources for interagency efforts is one of the challenges confronting the service community. Agency budgets are currently strained, and new initiatives typically require additional staff as well as retraining of existing staff. Cooperative interagency arrangements are supported with discretionary funds that remain within the control of the individual agencies engaged in the collective action. Because coordination usually requires a larger resource commitment than cooperative interagency efforts, single agencies dedicate funds from their separate agency budgets to the

interorganizational initiative. The amount and use of these resources remain within the control of the individual agencies.

The more interdependently that agencies will need to act to accomplish a particular interagency objective, the more likely that resources made available for the enterprise from a variety of sources will need to be pooled and administered as a single fund. Collaborative interagency relationships are supported with pooled resources, which are largely within the control of the interagency unit. Participating organizations are expected to provide resources to the interagency unit in order to support the interagency initiative using a formula that is agreed upon by all involved parties. In effect, agencies make contributions to the collaborative unit in exchange for ongoing participation in its activities. Sometimes, collaborative interagency units seek out additional resources by applying for grants or by generating other sources of income.

Power and Influence

The use of power and influence by agencies involved in an interagency effort, both singly and collectively, is a critical factor in achieving successful collective action. Effective interagency efforts are determined in part by a willingness of participating agencies to share. Whether they share new programs and resources or reconstruct existing efforts to make them more integrated, agencies are always involved in activities that relate to establishing legitimate boundaries for the interagency activity.

As interagency arrangements are developed, and then maintained, it is inevitable that differing understandings and needs will arise between and among involved agencies. These issues reflect one of the most important challenges to the development of successful interagency initiatives. As a part of their modus operandi, single agencies engage in a variety of activities designed to protect agency enterprises from being seized by other units or service providers. Agencies stake out their territories; any perceived intrusion into their professional and organizational domains results in the agencies' aggressively defending their boundaries.

Agencies will also view with alarm interagency initiatives that are imposed upon them from external sources. Joint state and local agency participation in planning and actions enables local jurisdictions to develop the proposed new school initiatives. Establishing a degree of comfort around turf issues inherent in the interagency enterprise will occupy the time and energies of both state and local planners.

It is essential that agencies that are establishing an interagency effort make decisions from the start as to what will remain the prerogatives of individual agencies and what may be legitimately addressed through collective action. As the interagency enterprise develops, additional turf issues will inevitably arise. The presence of such issues can interfere with successful accomplish-

ment of the interagency objective. Therefore, involved agencies must establish procedures for resolving disagreements about territorial issues before they arise. Different strategies for reaching agreement will work depending on the kind of interagency effort in which agencies are engaged—that is, whether it is cooperative, coordinative, or collaborative.

In addition, acceptable procedures for using power and for resolving agency disagreements will need to be established if trust is to develop among participants. Coercive agency attempts to influence the interagency initiative tend to occur until agreed upon procedures have been established to deal with these influence attempts. Successful interagency collaboration is dependent upon the unit's capacity to confront and to defuse dysfunctional power attempts by member organizations. Inappropriate use of power represents a lack of trust among involved participants and will impede progress of the parties. Although the tendency is to avoid such unpleasant behavior, interagency units must develop procedures that will allow them to identify the reasons for such power attempts and to address them in ways that are satisfactory to involved parties.

Cooperative interagency efforts can work well without establishing agreement about turf issues among participating agencies. The collective task is highly focused and only limited segments of single agencies are involved. Because so few people and units are involved, and because the objective is not intrusive, conference planning can be successfully completed without addressing power and turf issues and without establishing conflict resolution procedures.

Disagreements about areas of responsibility do arise in coordinative interagency efforts; therefore, procedures to establish agreement about territorial issues need to be developed. Successful coordinative arrangements use majority rule voting processes to resolve these kinds of conflicts; individual agency concerns are discussed and, to the extent possible, addressed satisfactorily by the interagency unit.

Representatives of participating agencies in a coordinative interagency activity must engage in intensive information sharing with regard to the specific objective that is sought; that is, each agency must make certain that its efforts do not interfere with those of other participating agencies. Also, each agency must be supportive of activities of other agencies that are not intended to interfere with interagency progress, but rather to fulfill their individual responsibilities. Information sharing about these issues begins with the members of the interagency committee, who must also facilitate the development of effective decision-making processes in the coordinative effort.

In order for collaboration to work, the interagency unit must engage in a series of planning activities designed to ensure that the individual agencies receive an equitable share of the benefits and resources. Agencies must believe that they are receiving a fair share of the benefits in exchange for their

investment in the collaborative effort. There are two key factors in the development of such trust. First, agencies must create interagency procedures for establishing agreement about the boundaries within which the collective enterprise will be undertaken. These procedures will also be used as the collaborative unit considers possible expansion of initial plans and activities in the interest of expanding services for the targeted client population. Second, power attempts that appear to be coercive or disruptive must be confronted so that the concerns that prompted agency use of power in unacceptable ways can be identified and addressed. Use of power in this way is usually a symptom of an underlying problem. By confronting power issues openly, trust is rebuilt and positive interagency relationships are sustained.

Unlike coordination where majority rule voting processes will suffice, collaborative interagency efforts require procedures that resolve disagreements about territorial issues through consensus building. Interagency unit members must agree about these critical issues. Collaboration cannot occur unless turf issues are directly addressed; all involved parties agree on what will be the responsibility of the interagency initiative and what will remain the prerogative of the single involved agencies. These decisions must be systematically revisited as interagency planners move towards implementation of their collaborative objective, and procedural modifications made where appropriate. The ways in which power and influence need to be exercised in cooperative, coordinative, and collaborative initiatives are depicted in the following chart:

Characteristics of Power and Influence

Characteristics	Cooperation	Coordination	Collaboration
Locus of Control	Control rests with the single agencies	Control rests with the single agencies	Control is given to the interagency unit by the single agencies
	Interorganizational boundary negotiations are not needed	Single agencies negotiate inter-organizational boundaries	Extensive negotiations about interagency boundaries within the collaborative unit and among the single agencies are needed
Use of Power	Turf issues rarely surface; establishing procedures for obtaining agreement are not necessary	Disagreements are resolved within the interagency council using majority rule voting procedure	Disagreements are resolved within the interagency unit and the coordinating council using consensus-building processes

Interagency Relationships

The ways in which agencies relate to each other can either facilitate or destroy an interagency effort. Thus, it is important that interagency planners do not just let these relationships evolve. Rather, procedures need to be established to enhance the probability that interagency relationships will be positive. These processes include developing and maintaining trust among participating agencies, establishing procedures for investing in the interagency effort that are considered fair, developing acceptable procedures for making interagency decisions, and creating facilitative processes for sharing information about the interagency effort. Agencies involved in the interagency effort expect that they will derive some benefits from their participation and that the costs to them of involvement do not exceed the potential benefits from participation. For example, as planners engage in the collaborative enterprise, they will need to address the extent to which agencies are willing to incur short-term costs in the interests of making a major social improvement—fostering the development of a coordinated service delivery system for children and their families.

In addition, relationships between involved parties must be based on trust. Deciding at the start about what are acceptable exchange processes between the single agencies and the interagency unit as well as about what each wishes to obtain from involvement in the interagency enterprise are key factors in building trust in the interagency unit. Making these decisions will greatly enhance the capacity of an interagency unit to accomplish its objectives successfully. Once these procedures have been created, the interagency unit will need to re-examine them periodically to ascertain whether modifications are necessary as the unit moves from planning to implementation.

Positive relationships between participants in interagency efforts are also dependent on the ways in which decisions related to accomplishing the interagency effort and to defining single agency involvement in that effort are made. By and large, when agencies work together they need to have an equitable role in the decision-making processes. The bases upon which interagency decisions are made vary depending on whether the interagency effort is cooperative, coordinative, or collaborative. Interagency decision-making is another key factor in the development of successful interagency relationships.

In cooperative arrangements, interagency decisions are appropriately made by the single agencies. The situation is constructed such that single agency needs take priority over interagency needs. The decision to cooperate in sponsoring a short-term event can be made through normal organizational decision-making processes. Individuals working on the event are empowered to act only within the framework of decisions made within their individual agencies. In addition, little or no need for information sharing among agencies exists in order to plan and run the event; each agency simply shares

information about its own organizational needs that the conference is intended to satisfy.

Interagency decision making in coordinative interagency efforts is a much more critical issue than it is in cooperative arrangements. In successful coordinated interagency activities, interagency decisions must be consistent with single agency decisions at the same time as interagency needs are addressed. As is the case with cooperation, the needs of the interagency effort are considered secondary to the needs of the individual agencies.

In large part, such shared decision-making processes distinguish collaborative interagency efforts from cooperation and coordination. Without these processes, collaboration is not possible. Moreover, within collaborative interagency arrangements, decisions are commonly made on the basis of how best to achieve the interagency objectives. Decision-making processes that work in collaborative interagency arrangements require extensive information sharing among the individuals involved in the collaborative effort, within single agencies, among participating agencies, and between single agencies and the collaborative. This information sharing commonly goes beyond the needs of the interagency objective and encompasses a wide range of peripheral issues. In effect, collaborative relationships require a high degree of risk taking on the part of individual agencies that agree to entrust the collaborative with responsibility to accomplish its interagency objectives in the best way, without continuous reference to the individual agencies for direction or approval. The following chart depicts characteristics of interagency relationships as they happen in cooperative, coordinative, and collaborative arrangements:

Characteristics of Interagency Relationships

Characteristics	Cooperation	Coordination	Collaboration
Building Trust	Minimal trust is required	Trust needs to be established about accomplishing the interagency objective	Trust needs to be established and also maintained over time
Exchange Process	Units of exchange are clearly defined by single agencies	Units of exhange are mostly dependent upon single agency needs	Units of exhange are dependent on the needs of the interagency unit
	Units of exchange are determined on a one-time only basis	Units of exchange are renegotiated every year	Requires a long-term commitment of units of exchange
Decision Making	Decisions are made unilaterally by the single agencies	Decisions are made by the single agencies within the framework of accomplishing the interagency objective	Decisions are made by the interagency unit using consensus-building procedures
Information Sharing	Focused on the specific interagency task; no additional information needed	Focused on information about the interagency goal and about facilitating coordination	Focused on information about the interagency goal and about the general good of the involved agencies

The success of any enterprise in which several agencies work collectively through an interagency unit to accomplish a common objective is dependent upon the development of positive relationships within the interagency unit, and between the interagency unit and the sponsoring agencies. Positive interagency relationships are developed when the interagency unit engages in a series of deliberate actions to develop interagency procedures that foster (1) resolution of conflicts, (2) the development of trust, (3) determination of acceptable benefits to be derived from involvement in the enterprise, (4) enhancement of information sharing, and (5) definition of acceptable bases upon which interagency decisions will be made. These kinds of actions are often not undertaken when an interagency unit is formed; rather, the new enterprise focuses most of its energies on pressing program issues. Allowing relationships in the interagency unit to evolve in this manner is a serious source of dysfunction in interagency initiatives.

The Three Interagency Types

Little creative effort is required to plan and carry out a cooperative interagency effort such as sponsoring a joint conference. Rather, it is largely an administrative process of deciding how best to meet previously established organizational needs within the budgetary and time constraints that prevail. Essentially, single agency needs are being met using a cooperative administrative process that involves sharing a specific task and the benefits that accrue from accomplishment of that task with another unit or organization. Moreover, cooperative interagency efforts can be accomplished by lower-level personnel than by either coordinative or collaborative enterprises. For these reasons, joint conference planning and implementation can best be done using a cooperative interagency effort. Cooperation is an important interagency arrangement that may be used quite successfully in the accomplishment of interagency objectives that require minimal amounts of interdependence.

Within the framework of coordinated interagency relationships, creative efforts are usually directed toward implementation activities; therefore, procedures for working together on a continuing basis must be established. Coordination is a formal activity requiring time, resources, and commitment by all participating agencies. It takes longer to accomplish than cooperation, but has the potential to provide more benefits to the individual agencies.

Collaborative interagency efforts represent a higher degree of interdependence than coordinative and cooperative arrangements. The creative efforts of the collaborative will initially be directed toward defining the nature of the problem to be addressed, toward creating appropriate interorganizational procedures, toward establishing an effective work group in the new collaborative unit, and after that, toward developing means for accomplishing the objectives. The appointment of a facilitative policy board is also a key factor in successful collaborative units.

Cooperation, coordination, and collaboration are all appropriate interagency approaches to accomplishing different kinds of interorganizational objectives. The broader and more complex the interagency objective, the more agency interdependence is required. The need to develop interagency policies and new interagency structures expands as the degree of agency interdependence increases. Cooperation and coordination are dependent on single agency resource contributions; collaboration requires pooled agency resources.

The greater the degree of interdependence, the greater the need for agency representatives to demonstrate loyalty to both single agency concerns and to the interagency effort, and the more likely that procedures will need to be developed to resolve disagreements about territorial issues. Coordinative interagency efforts can be accomplished successfully using majority rule voting procedures for conflict resolution; collaboration requires the building

of consensus in establishing agreement. All participating agencies must agree on what are legitimate interagency concerns and what are appropriate single agency responsibilities.

In cooperation and coordination, interagency decisions are made primarily by single agencies; on the other hand, significant authority for decision making in collaborative interagency efforts is assigned to the collaborative unit. Staff and committee members play critical roles in ensuring that a particular interagency effort works. The greater the degree of interdependence, the more need for personnel who have full-time responsibility to the interagency unit, who are risk-takers, and who have the capacity to address complex interagency problems creatively. Issues related to possible role conflicts must be addressed. In collaborative interagency efforts, committee members play critical roles in balancing interagency needs with the concerns of single agency participants.

Bottom line, each type of interagency effort is potentially effective. Decisions about which type to use begin with an analysis of the interagency objectives to be accomplished. Organizational conditions, interagency procedures, and interpersonal relationships then need to be *deliberately* structured to fit the nature of the interagency objective. Coordination and collaboration cannot be implemented solely by signing an interagency agreement/contract—a popular approach to state-level interagency service coordination efforts. Energies need to be systematically devoted to addressing the issues described above.

While there are a number of interagency conditions and relationships that might be examined in any interagency arrangement, the preceding seven factors best discriminate between cooperative, coordinative, or collaborative interagency efforts. Moreover, it is in those seven interagency features that areas of dysfunction can be identified and strategies for addressing these problems can be identified and used to improve interagency efforts.

Diagnostic Profiles of Interagency Efforts

The following analysis of the organizational conditions in an Interagency Coordinating Council (ICC) demonstrates the ways in which the seven organizational features of cooperative, coordinative, and collaborative interagency efforts can be used to identify and change dysfunctional features of developing interorganizational enterprises. Interagency planners can use the descriptors of each of the seven features in the organizational framework to develop a diagnostic profile of their interagency initiative. A review of current conditions allows planners to ascertain the degree of interdependence that has been achieved in each of the seven areas.

The profile depicted below represents the current conditions in an Interagency Coordinating Council established to create coordinated, interdisciplinary, family-centered services for infants and toddlers with disabilities and their families. Called the Part H project, this is the state's effort to implement such a program as stipulated in the federal Individuals with Disabilities Education Act. This initiative had a collaborative interagency objective because the system could not be developed by any single agency. It is a long-term initiative and the issues to be addressed by the interagency planners are very complex.

Profile of an Interagency Coordinating Council

Concept	Cooperation	Coordination	Collaboration
Interagency Objective			X
Interagency Policies	X		
Interagency Structure		X	
Personnel Roles			X
Resource Allocation		X	
Power and Influence		X	
Interagency Relationships			X

Because the ICC is trying to accomplish a *collaborative interagency objective*, it needs to create an organizational structure in which the six other conditions are also collaborative; that is, interagency policies, interagency structure, personnel roles, resource allocation, power and influence, and interagency relationsips. As depicted in the above profile, an organizational analysis of the ICC revealed that only three conditions could be categorized as collaborative; the remaining three were either cooperative or coordinative. The nature of the policies, structure, power and influence, and resource allocation procedures helped to explain why the committee was having some difficulty in accomplishing its objectives.

Once planners pinpointed these areas of dysfunction, they were able to design a set of activities to address problem areas, which had been serving as barriers to successful collaborative program implementation. What follows

are examples of the data that were used to categorize the personnel roles and resource allocation processes in this coordinated council (Intriligator & Goldman, 1989; Goldman & Intriligator, 1988). They are included to demonstrate how the organizational conditions and processes described in this paper may be used to examine the performance of ongoing interagency activities as well as to strengthen the collaboration.

Personnel Roles in the ICC

When this analysis was done, the ICC was engaged in planning activities delineated in its authorizing legislation. Staff supporting the work of the ICC were employees of the Department of Education, the state agency assigned lead responsibility for creating the service delivery system. This situation suggests that a primary issue that will arise with regard to interagency personnel roles is the relationship between the staff assigned to the Part H project and the Interagency Coordinating Council. To the extent that the project director and her staff are viewed as employees of the lead agency, and concomitantly as not being substantially influenced by the views of the ICC, members of the council will begin to question their role and probable impact on the interagency effort. It can also be expected that under such conditions these agency representatives serving on the ICC will be under increasing pressure within their home organizations to protect single agency interests and areas of responsibility.

The primary functions of the Part H project staff involved with this ICC are defined according to the set of objectives that they perceive themselves as carrying out—objectives that are both self-defined and determined by the federal and state mandates. If program staff perceive their role as that of carrying out the ICC interagency initiative in addition to fulfilling their responsibilities to their home agency, then their actions will support the need for the ICC to behave as a collaborative interagency unit. On the other hand, if the staff perceive their responsibilities to carry out their home agency's objectives and perceived prerogatives, then their behavior will reduce the possibility that implementation of the Part H project will take place through collaborative processes because the Department of Education had been the primary service provider for the targeted population. Up to that time, Part H staff have managed to work effectively on behalf of the ICC as well as on behalf of their own lead agency, the Department of Education.

In this state, a relatively small and close-knit group of individuals have been involved in most state interagency committees over the past decade. Agency representatives to the ICC are in many cases the same individuals who were then, or had been in the past, members of other state interagency committees. ICC members indicated that "we've been working with this group for a long time" and "the basic thing [about the ICC] is a change in the way we think . . . [we are] less territorial." These statements suggest that changes in

perceptions and behaviors were emerging that might serve to insure accomplishment of the collaborative interagency objective. The operation of the ICC as a true collaborative unit would provide these individuals (or their designees) with the opportunity to shift their roles and to influence the perceptions of others in important ways. If the ICC does not function as a collaborative unit, these individuals indicated that they will have no alternative other than to resort to agency protective behaviors.

By and large, ICC members continued to demonstrate primary loyalty to their home agencies. Personnel and agencies were not yet satisfied that their home agency interests were protected in the ICC environment. If interagency policies that define such relationships were in place, we would most likely have seen changes in these behaviors. Efforts by the ICC to expand activities that would promote additional consensus building were continuing. Moreover, personnel involved with the ICC had demonstrated a professional commitment to the development of a comprehensive early intervention service delivery system for infants and toddlers with disabilities and their families. Thus, where they believed it possible, they also demonstrated loyalty to the interagency effort as they fulfilled responsibilities associated with their positions on the ICC.

Indeed, the extent to which loyalty to the interagency effort develops is, in large part, a function of the amount of influence council members have on final decisions about interagency plans and activities; the amount of influence that the ICC has will depend upon the role the ICC is given with respect to the development of program plans. Personnel roles in this ICC were characterized as *Collaborative*. At that point in time, it appeared that these individuals found their roles in the ICC congruent with their home agency roles and responsibilities (Goldman & Intriligator, 1988).

Resource Allocation Processes in the ICC

Interagency planning faces its biggest challenge when agencies begin to define what resources will be allocated to the collective effort and how these resources will be administered. The national experience with Part H planning efforts indicates that agencies tend to procrastinate in addressing resource issues in the early stages of planning because they know almost intuitively that this will be one of the most difficult issues to address (Intriligator, 1990a; Baldwin et al., 1991). In collaborative enterprises agencies must define criteria for equitable agency resource contributions and establish a pool of resources that are made available to program developers to support the new programs and services. The ICC had not addressed resource issues adequately.

The Department of Education, as the lead agency, had a budget that was comprised of federal planning grant monies and state support. While not obtained from the separate agencies (as is characteristic of collaborative interagency arrangements), these monies had the potential to serve as the

beginning of a development of a resource pool for use by the ICC. At the time of the study, use of resources by the ICC corresponded to the ways that resources are allocated in coordinative interagency arrangements, even though the ICC had a collaborative interagency objective. Each of the involved agencies had dedicated a portion of their annual budgets to the work they would each do for the Part H project, and there had been limited discussion about how to ascertain the fair share of each involved party. Agencies had indicated a desire to oversee how their contributions were being used and they expected to receive direct benefits as a result of their investments.

The location and responsibility for Part H funds (federal, state, and local) was emerging as an area of contention as implementation of Part H progressed. The extent to which this is viewed by participating agencies as a problem depends upon the emergent roles of the lead agency, the ICC, and the program staff. It also depends on the nature of the interactions with the single involved agencies and the extent to which these agencies believe that they have influenced the process. Viewing these funds as a resource pool subject to ICC control (within the framework, of course, of existing state policies and regulations governing disbursements) would provide an incentive for collaboration and consensus building in the ICC interagency unit. Resource allocation in the ICC was categorized as *Coordinative* (Goldman & Intriligator, 1988).

The ICC Profile as a Diagnostic Tool

This lack of attention to resource allocation processes by the ICC proved to be an increasing source of dysfunction in the interagency effort and became a significant barrier to collaborative implementation of Part H. On the other hand, personnel roles in the ICC were highly developed and had all the collaborative features needed to support accomplishment of the interagency objective. Indeed, developing a profile picture of current conditions enabled interagency planners on the ICC to focus their efforts on changing those organizational conditions that were not sufficiently interdependent—that is, collaborative enough—to facilitate accomplishment of the interagency objective.

In effect, interagency planners would benefit from doing an annual assessment of the organizational conditions present in their arrangement. This process will enable them to identify areas for improvement or even to explain delays in accomplishing the interagency goals. As planners move into development and implementation of their collective programs, they will need to perform this assessment again in order to ascertain whether the organizational conditions continue to support their development activities.

Implications for Coordinated Services for Children

The focal point of the interorganizational framework described in this chapter is the interagency unit. Many interagency units have been developed by organizations involved in coordinating services for children and their families. Successful operation of these interagency units requires the development of collaborative conditions to support accomplishment of this major interagency objective, because of the length of time it will take to accomplish and the complexity of the issues to be addressed. Confronting these issues requires making modifications in the ways that local agencies provide services. Development of comprehensive service delivery systems requires the creation of interagency units at state and local levels that are empowered to make decisions necessary to accomplish that objective.

The first order of business for the new collaborative interagency effort is the formulation of policies or bylaws that provide guidance for management of the interagency unit and for formalizing relationships within the unit and with collaborating organizations. Such policies need to delineate procedures that the interagency unit will follow in order to build and maintain positive relationships among the key actors and participants. Establishment of a resource pool to support the enterprise and its programs must be considered early on, along with identification of staff who will support interagency unit planning activities. These activities will help to develop trust among participating agency representatives and to foster commitment to the interagency goal.

Planners of service coordination efforts often neglect to devote attention to creating facilitative organizational structures to support proposed interagency efforts. While such activities will be time consuming in the short-term, they will seriously enhance the chances of developing an integrated effort that works. Descriptors of the features of the organizational conditions presented in this model have been used successfully by interagency planners both to establish a positive working environment for their interagency efforts and to diagnose moments of dysfunction as they have inevitably occurred in such long-term enterprises.

This research suggests that coordinated services for children and families are most likely to occur when:

- single agency/partner resources and/or expertise are, or are perceived to be, adequate to address the complex needs of a client or program;
- agencies assume mutual responsibility for developing and improving intended programs and services;
- agencies transform their collective activities from initial person-dependent relationships to the development of facilitative organizational structures within which interagency planning and development can occur;

- the type of interorganizational structure established is suitable to the proposed collective outcome;
- organizations devote time and energy to both program development issues and to establishing and maintaining positive relationships among partners; and
- periodic assessments of the effectiveness of interagency arrangements are conducted and mid-course corrections are undertaken.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Baldwin, D., Intriligator, B. A., Jeffries, G., Kaufmann, R., & Walsh, S. (1991). *Critical factors in the development of Part H service systems: An analysis of progress to date*. Iowa City, IA: National Maternal and Child Health Resource Center.

Goldman, H., & Intriligator, B. A. (1988). *A profile of state interagency efforts for children with special needs and their families*. Arlington, VA: ICA; Washington, DC: Georgetown University Child Development Center. ED 335849

Intriligator, B. A. (1990a). Planning activities in local Part H jurisdictions. *Early Childhood Reporter*, Alexandria, VA.

Intriligator, B. A. (1990b). *Toward an integrated service delivery system for children and families*. Synthesis paper from the 1990 Virginia Symposium sponsored by the American Association of Colleges for Teacher Education and the American Academy of Pediatrics.

Intriligator, B. A. (1992). *Designing effective inter-organizational networks*. Paper presented at the annual meeting of the University Council for Educational Administration, Minneapolis, MN.

Intriligator, B. A., & Goldman, H. (1989). *The Part H initiative: Towards a community-based service delivery system for infants and toddlers with handicaps and their families*. Arlington, VA: ICA; Washington, DC: Georgetown University Child Development Center. ED 335850

III

Constructing a Multicultural Framework for Coordinated Children's Services

Beatrice S. Fennimore

The children and families of America are served by a wide variety of professionals who must be responsive to their social and cultural realities as well as to the needs that require service and assistance. As Melaville and Blank (1991) describe in *What It Takes: Structuring Interagency Partnerships to Connect Children and Families with Comprehensive Services*, thousands of health workers, youth workers, child-care providers, teachers, employment and training personnel, mental health counselors, and many others face the responsibility each day of fostering success in a highly diverse child and family population. All these professionals, whose vision and commitment has the potential to create powerful changes in the lives of others, will apply their own values and sense of ethics to every human interaction. Therefore, the genuinely collaborative ventures creating progress for children and families at the service delivery and system level must be informed and shaped by an understanding of an active framework of multiculturalism that recognizes and respects differences among people.

Envisioning a Multicultural Framework for Children's Services

The effort to structure a truly effective multicultural framework for coordinated children's services is challenging and complex. It must begin with awareness of critical realities facing American children in the 1990s and end with specific commitments to create change on the program level. Although there has been a decrease in the total number of young children born in the United States—children comprised 26% of the population in 1989 compared to 36% in 1960 (Rosewater, 1989)—there has been a coinciding increase in the number and proportion of children who have been traditionally termed disadvantaged. In connection with the widening gap between the rich

and poor is the anticipation of a 37% increase in the number of children in America living in poverty by the turn of the century (Natriello, McDill, & Pallas, 1990). In fact, there is every indication that the difficulties faced by children growing up in poverty today are more acute than they were in 1965 when the Great Society antipoverty programs were created. Over half the nation's largest urban centers, for example, now have school populations that are predominantly African American or Hispanic American and which are more likely to be poor and from single-parent homes (Committee for Economic Development, 1991). Children's difficulties created by poverty are joined by the general trend toward increasing cultural diversity in the United States. Population data suggest that this trend will continue, with the Hispanic American population experiencing a projected increase of 28.6% between 1990 and 2000 and the African American population increasing 10.1% during the same time period. In addition, the country experienced a large influx of Asian Americans in the 1980s. Thus, America has continued on some levels to be open to immigration while also continuing to grapple with massive problems of poverty in children and young families (Baruth & Manning, 1992).

What kind of multicultural framework can approach the difficulties of children with efficacy combined with a spirit of optimism? Continuing problems of prejudice and discrimination in America have demonstrated that a conceptualization of a melting pot, in which all people reach equal acceptance and opportunity by developing a single new national identity, is neither possible nor even desirable. A more rational and humane approach appears to be the concept of a salad, in which all groups retain cultural differences while combining in a lively and productive society (Baruth & Manning, 1992). However, the acceptance and treatment of cultural differences continue to challenge those who are responsible for structuring and working within frameworks of intervention for children and families. The model of cultural deficit, widely implemented in poverty programs of the 1960s, implied blame for social difficulties on the lifestyles and values of all those who differed from the White middle class. Many multicultural scholars have advocated for a change from a model of deficit to one of acceptance and valuing of difference among people. The concept of cultural relativism (Gollnick & Chinn, 1990) encourages multicultural skills that enable one to understand other cultural systems in their own terms, and not in terms of one's own personal and cultural beliefs. Professionals with skills in cultural relativism need to know themselves in terms of their own potential attitudinal biases, and also need to be willing to learn about the strengths and positive attributes of those in need of their service.

For the many human service professionals who were trained in cultural deficit models of thought and intervention, the term multiculturalism may connote international understandings or basic information about different

countries, languages, and lifestyles. Within that context, such activities as international dinners are often utilized as multicultural approaches. However, as the conceptualization of multiculturalism has progressed, it has come to be a term describing policies and practices in human service-based interventions that recognize, accept, and also affirm human similarities and differences related to race, age, class, handicap (disability), and gender (Sleeter & Grant, 1988). Moreover, the term has also come to connote a reform process whose aim is to create an educational and social environment in which a wide range of cultural groups experience equity. As such, multicultural approaches are reconstructionist as they seek to engage both the professional and client in a mutual and evolving social movement toward greater equality through development of problem-solving and political action skills (Baruth & Manning, 1992). It is critical to recognize at the outset, therefore, that while multiculturalism as it relates to coordinated children's services is a positive force, it is both controversial and politicized. It continues to be debated and criticized in its formative stages, largely because it deals with serious problems in society and challenges current dominant norms and values (Ramsey, Vold, & Williams, 1989). As those problems continue to be addressed and rectified, multiculturalism at its most powerful will impact on the total environment of human services, including institutional norms, policies, methods of testing and counseling, attitudes, expectations, and hidden curriculums of human beliefs and interactions (Banks, 1991). Those services for children that seek to build a multicultural framework will undoubtedly need to engage in a process of restructuring that combines respect and knowledge of diversity with better coordinated and more efficient systems. While difficulties will undoubtedly be encountered in this process, the energy and optimism required for success will result in a far greater and healthier America. As the Committee for Economic Development states (1991, p. 15),

> If we can ensure that all children are born healthy and develop the skills and knowledge they need to be productive, self-supporting adults, whatever is spent on their development and education will be returned many times over in higher productivity, incomes, and taxes and in lower costs for welfare, health care, crime, and a myriad of other economic and social problems.

The act of ensuring a healthy child population does not simply depend on public expenditures or professional intervention. It depends in a critical way on the ability of all responsible professionals involved in human interventions to value and respect diversity and to utilize multicultural skills to promote a truly equitable nation that can support the successes and gains of coordinated programs for children.

Changing from a Deficit to a Multicultural Model of Service

Since the concept of multiculturalism is relatively new, controversial, and open to wide interpretation, it is realistic to assume that many services for children and families are still very much shaped and affected by at least some ramifications of deficit-based conceptualizations of people in need. Service providers need support and assistance in building a culturally relativistic atmosphere of mutual respect and partnership enabling children and their families to ultimately meet their own needs and potential. Multicultural attitudes help professionals to recognize that it is not sufficient to envision changes in the lives of those in need of assistance without also recognizing that social institutions must also change in terms of accessibility and accountability. While problems and difficulties of an undeniably serious nature can and do exist in the lives of children, the resolution of those problems should be conceptualized as more of a broadening within a valuable cultural context than a rejection of an inappropriate cultural context (Ramsey, 1987).

Professionals in coordinated children's services who are willing to shift from deficit to multicultural models of thought need not feel either inadequate or defensive. Many of them were schooled themselves within an educational model of ethnocentrism that implied that it was only the White cultural experience that was valid, superior, and universally applicable in evaluating and judging human behavior (Baruch & Manning, 1992). By working with resolve to increase awareness of their own cultural experiences as well as those of others, professionals can build and ultimately put into positive action the belief that human difference is not human deficit. For example, a professional who is at first prone to deny awareness of differences ("I don't see color, I just see children") might begin to recognize and value differences ("I see and affirm color in children, and include it in my framework of acceptance and valuing of diversity").

While focusing on the positive and productive aspects of multiculturalism, it is also important for those concerned with children and family services to recognize that racism does still exist in American society—either openly in remarks, materials and resources, and behaviors of biased professionals, or in new guises of limited perception of ability and future possibility of children served by programs (Baruch & Manning, 1992). It is also important to admit within the professional context that discrimination is always two-sided in effect because it helps some as it hinders others—some do indeed benefit in our society from the results of racism, sexism, and other forms of active social prejudice (Nieto, 1992). Admission and analysis of the existence of prejudice in its many forms is a critical key to values and attitudes that enhance the move from deficit to multicultural models. Does the American social context provide a meritocracy in which all can equally compete for goods and services, or has our democracy failed in important ways to provide equal opportunities for all citizens? As Gollnick and Chinn write (1990, p. 25):

> With the persistence of racism, poverty, unemployment, chronic crisis, and inequality in major social systems such as education and health, many persons have found it difficult to reconcile daily realities with the publicized egalitarianism that characterizes the rhetoric of our nation's leaders.

Therefore, within any consideration of advancement to new and powerful multicultural models of intervention, the concept of human and social equality must also be advanced. While there is often a stated belief in the American democracy that all people are created equal, the actual implementation of standards of equality for all people continues to be a challenge. The need for ongoing progress in building true social equality should be viewed by professionals not as a cause for discouragement but as an exciting opportunity to work toward empowering American children and families to achieve social, political, and economic success in their lifetimes.

Implementing Positive Multicultural Frameworks

Implementation of a successful multicultural framework requires knowledge of areas of human experience and condition that tend to invite either deficit-based or multicultural responses from professionals. Once an organizational policy decision is made to improve multicultural skills, individual professionals sincere in a desire to grow will need to analyze each area in terms of their current understanding, attitudes, and behaviors as well as changes that will enhance practice in the field. The first general area that should be examined is that of culture—what is it and how is it identified? Banks (1991) states that culture embodies a wide range of human experiences and includes institutions, language, values, religion, ideas, habits of thinking, artistic expression, and patterns of social and interpersonal relationships. A professional with multicultural skills working with a teenage single parent who has dropped out of high school must understand the experiences, institutions, language, values, ideas, and relationships encountered by that parent to help broaden and empower her own ability to care for her child and herself. This might include awareness of internalized negative effects of childhood poverty; awareness of past attendance at inequitable urban schools characterized by low staff expectation and subsequent failure to observe and capitalize on abilities of students (Good & Brophy, 1987); and awareness of the presence of existing strong extended family relationships that could support successful parenting. A deficit-based approach, in comparison, would be characterized by a belief that little could be done to help such a parent, or by blaming the teenager for being someone lacking the necessary values to make good choices.

The concept of race, also central to multicultural understandings, should be approached with caution. Race does refer to physical and genetic differences between people (Baruth & Manning, 1992) but does not identify nationality, language, or religion (Gollnick & Chinn, 1990). Black or White, therefore, are racial terms that fail to connote a great deal that is similar and different about people with different cultural experiences.

Social class has a powerful impact on perceptions of both class and race, and embodies values, attitudes, behaviors, and beliefs within a socioeconomic context. When a social class experience involves poverty, unemployment, and inability to meet basic needs, feelings of helplessness, dependency, and inferiority can be the result. A multicultural approach to children or families with lower social class identification, particularly when linked with possible experiences of racial discrimination, should avoid assumption of a lack of ambition or motivation. It is always possible that those experiencing poverty and other social class dilemmas have earnestly sought improvement in their situations and met with frustration (Baruth & Manning, 1992). Professionals must therefore solicit information on frustrations and setbacks that individuals have encountered in earnest efforts to improve circumstances, and offer suggestions for ways in which prejudice or discrimination on the part of others might be overcome.

Ethnicity is a term that helps to conceptualize how members of a group perceive themselves and how they are perceived by others. These perceptions include group image and history and shared political and economic interests. Current multicultural study and terminology have identified a wide variety of geo-cultural groups and subgroups, which aid in ethnic understanding of the American and global population (Banks, 1991; Baruth & Manning, 1992). For the purpose of this chapter, the geo-cultural groups of African Americans, Asian Americans, European Americans, Hispanic Americans, and Native Americans will be presented and clarified. The reader is well advised, however, to understand that there are many cultural groups and subgroups in the United States that, depending on service and geographical location, will require recognition as well as application of multicultural skills and understanding.

All five geo-cultural groups identified here have experienced struggles in their attempts to become accepted and to achieve equal opportunities in the United States. Most African Americans in America originated from West Africa, and came to this country on an involuntary basis through slavery. Asian Americans, whose numbers in this country increased markedly during the 1980s, embody many subcultural groups, each of which have their own history and cultural stratification. Of the 48 million immigrants who entered the United States between 1820 and 1978, most (74.4%) were European (Banks, 1991). European Americans, like others, often changed their names or denied their ethnic heritage to gain social and economic mobility. Hispanic

American is a general title given to all people of Spanish origin and descent, but again many subgroups also have unique and distinguishing social and cultural practices. Native Americans comprise about one-half of a percent of the total United States population, and most reside in urban and metropolitan areas or on traditional Native American lands (Baruth & Manning, 1992).

Identification and recognition of geo-cultural groups and subgroups enable professionals to move beyond minority and majority stratifications to apply more specific and useful multicultural knowledge to the people served. It is up to those working in comprehensive programs for children to be certain that all applicable groups are recognized and included in terms of history, social and political concerns, and for the strengths that can be utilized in building positive multicultural connections between children, families, and society as a whole. Equally important is the effort to maintain multicultural perspectives in homogeneous settings (all African or European American, for example) to be certain that professionals and clients alike have the opportunity to develop the social and cultural understandings of self and others (including an understanding of the nature of prejudice and discrimination), which enhance success in a global society. Ongoing training for staff members in specific cultural understandings should be conducted by community members with an in-depth understanding of the customs and shared values of those in need of service. This training should shape policies and most particularly interpersonal practices within the service.

Knowledge about approaches to race, culture, ethnicity, and geo-cultural groups or subgroups must be supplemented with awareness of five "isms" (Boyer, 1985), which can and do impact on diverse individuals in the United States. Racism, classism, handicappism, sexism, and ageism all focus attention on one aspect of a person rather than on the totality of his or her humanity. Personhood should always be the primary consideration, with potentially negative perceptions of other characteristics, if those negative perceptions cannot be completely eradicated, at least maintained in secondary perspective. Professionals with multicultural skills would not refer, for example, to "the poor" or "the handicapped" or "the aged," but to people experiencing poverty, people with disabling conditions, and people who are older.

Those who implement and work in coordinated children's services should openly acknowledge the continuing experience of prejudice and assist families in recognizing and overcoming it where it exists as a barrier. Attitudes that imply that inherent weaknesses are to blame for the lack of success of racially different families should be identified as harmful and counterproductive in policy statements as well as in directives for practice.

Gender differences between boys and girls and men and women involve thoughts, feelings, and behaviors associated with sex role and identification. While certain differences have been identified between males and females as they grow and develop, focus on personhood protects both sexes from rigid and

unwarranted assumptions, which serve to stereotype and to limit personal potential as well as actual accomplishment. Linked to gender is a separate area of lifestyle choice and sexual orientation. Each community requires a highly sensitive approach to sexual lifestyles that acknowledges both strongly held beliefs of adults (including religious convictions) and the realities of diverse human sexual orientations. Current indications of homophobia in American society challenge human service professionals to model accepting attitudes toward sexual orientation and to avoid bias and discrimination (Derman-Sparks, 1989) against those whose lifestyles or relationships are not sanctioned by culturally dominant social groups.

Other specific actions on the part of those implementing coordinated children's services that should be taken to ensure that a multicultural framework is in place include: using positive language, establishing a multicultural policy focus, designing services to create professional accountability, confronting institutional risks for children, supporting location-specific culture and ethnicity, and providing ongoing training and support for service providers in multiculturalism as well as advocacy for clients. All communications should be monitored to replace deficit language (i.e., terms such as high school drop outs, unmarried mothers, welfare families, crack babies) with positive and productive terminology (i.e., clients with continuing educational needs, parents needing support, families with economic challenges, babies with prenatal exposure to drugs) linked to real interventions (high school courses, child development training, job training, preschool programs) expected to impact on the problems. Policy statements within all programs should focus on client needs rather than client deficits, and address ways in which institutions and society at large might also change in terms of discrimination or lack of opportunity to promote the health and welfare of struggling children and families.

Open recognition by all who create and implement policy should exist that human service institutions may also reflect risks such as low expectations, stereotypical attitudes, or discriminatory practices, which inadvertently add to client dilemmas. All service evaluations and reports should encourage recognition of client strength as well as need, and should promote provider accountability for successful steps in remediation of challenges and problems. Interpersonal services such as counseling, social service, job training, or education on a variety of levels should respect and include wherever possible the language and customs of those in need of service. Materials as well as general decor in all facilities should reflect realistic and positive racial and cultural aspects of the place and people served. Coordinated staff support and staff training should support interagency policies that promote a multicultural focus and continue to confront lack of knowledge or understanding that might interfere with productive interactions with children and families.

True implementation of a multicultural framework most often involves ongoing willingness of all professionals to challenge their own attitudes and assumptions as well as those of their peers and clients when deemed appropriate. When a climate of multicultural growth truly exists, the ensuing level of tension or controversy should be viewed as a positive step in working toward a society that truly seeks to incorporate all people into the social, political, and economic mainstream of life in this country.

Continuing to Build on a Multicultural Framework

This chapter has focused on the critical importance of a multicultural framework within successful approaches to building coordinated children's services. Theoretical knowledge and personal awareness must be combined with dedication and commitment to active application of multicultural skills to a highly diverse and frequently challenged child population. Expectations for success of all children can only thrive in programs that fully extend multicultural foci to the ultimate goal of equality of opportunity for all the people of America.

Professionals and practitioners on the front line who at times become discouraged with current controversy over or resistance to multicultural approaches can benefit from a vision of advocacy for children (Fennimore, 1989). Such a vision enables professionals to see themselves as activists who not only react to social dilemmas but have an impact on them in personal interactions with others, through opportunities to educate or provide an example of multiculturalism for others, and through voicing their concerns within their professions and within public institutions and processes. Advocacy on social and political levels by professionals for the many diverse Americans in need of acceptance and support helps to sustain a sense of efficacy and optimism while further building multicultural acceptance of all people. Advocacy also will ultimately enhance and maintain a more equitable society in which all children and families can continue to enjoy the gains created by excellent and multicultural coordinated services for children.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time

of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Banks, J. A. (1991). *Teaching strategies for ethnic studies (5th ed.)*. Boston: Allyn and Bacon.

Baruth, L. G., & Manning, M. L. (1992). *Multicultural education of children and adolescents*. Boston: Allyn and Bacon.

Boyer, J. (1985). *Multicultural education: Product or process?* Kansas City: Kansas Urban Education Center. See ED 240224

Committee for Economic Development, Research and Policy Committee. (1991). *The unfinished agenda: A new vision for child development and education*. Washington, DC: Author. ED 336444

Derman-Sparks, L. (1989). *Anti-bias curriculum. Tools for empowering young children*. Washington, DC: National Association for the Education of Young Children. ED 305135

Fennimore, B. S. (1989). *Child advocacy for early childhood educators*. New York: Teachers College Press.

Gollnick, D. M., & Chinn, P. C. (1990). *Multicultural education in a pluralistic society*. Columbus, OH: Merrill Publishing Co. See ED 271419

Good, T. L., & Brophy, J. E. (1987). *Looking in classrooms*. New York: Harper & Row.

Melaville, A. I., & Blank, M. J. (1991). *What it takes. Structuring interagency partnerships to connect children and families with comprehensive services*. Washington, DC: Education and Human Services Consortium. ED 330748

Natriello, G., McDill, E. L., & Pallas, A. M. (1990). *Schooling disadvantaged children racing against catastrophe*. New York: Teachers College Press. ED 324388

Nieto, S. (1992). *Affirming diversity. The sociopolitical context of multicultural education*. New York: Longman.

Ramsey, P. G. (1987). *Teaching and learning in a diverse world: Multicultural education for young children*. New York: Teachers College Press.

Ramsey, P. G., Vold, E. B., & Williams, L. R. (1989). *Multicultural education. A source book*. New York: Garland Publishing, Inc.

Rosewater, A. (1989). Child and family trends: Beyond the numbers. In F. J. Macchiarola & A. Gartner (Eds.), *Caring for America's children* (pp. 4-19). New York: The Academy of Political Science.

Sleeter, C. E., & Grant, C. A. (1988). *Making choices for multicultural education: Five approaches to race, class and gender*. Columbus, OH: Merrill Publishing Co.

IV

The Organization of Family-School Interactions: A Prelude to School-linked Services

Claire E. Smrekar

Introduction

States, local communities, and foundations have responded to urgent demands for more and better coordinated services by creating organizational linkages across schools and human service agencies. The rationale for using schools as the linkage point is found in their unique relationship with students and families. Schools provide the organizational context for the most sustained and ongoing contact with children outside the family setting. In the rush to embrace and promote schools as the linchpin for this policy proposal, however, critical issues related to the nature of interactions between families and schools have been largely ignored by policymakers and educators.

This chapter focuses on the organizational conditions and social processes related to family-school interactions necessary to promote school-linked social service systems. These conditions and processes are contrasted with the institutionalized practices and policies shaping relationships and patterns of exchange between parents and teachers. The analysis underscores the need to examine issues of parent-teacher interactions and school community as a prelude to planning school-linked social service programs. The chapter outlines a set of policy proposals aimed at better understanding and promoting school community as critical preconditions for expanding linkages across families, schools, and human service agencies.

School-linked Social Service Programs: Implications for Families and Schools

The policy debates and implementation strategies associated with school-linked social services tend to focus on the politics of interorganizational

linkages, the competition for power and autonomy, and the struggles over turf (e.g., see Cunningham, 1990; Kirst, 1991; Wilson, 1989). While the politics undergirding horizontal and vertical linkages across schools and social services have been examined extensively, connections between families and schools have received relatively less attention, despite the critical changes in traditional roles and relationships school-linked social service arrangements imply. The importance of addressing family-school linkages rests with a set of sweeping assumptions regarding the roles of parents and teachers. Programs utilizing schools to improve access to and coordination of social services are linked to certain expectations regarding enhanced levels of trust, familiarity, communication, and information exchanged between parents and teachers.

Typically, these policy proposals couple programmatic expansion with subtle but overarching assumptions regarding the embeddedness of family life within the daily routines and rhythms of school (e.g., see New Beginnnings Demonstration Project of Integrated Services for Children and Families, San Diego, CA; New Jersey Department of Human Services School Based Youth Services Program; the Annie E. Casey Foundation's New Futures project). A traditional school asks teachers to think about what happens to their students in the classroom. A school linked to a social service delivery system asks teachers to go further, to think about what happens to their students when they go home. Under these arrangements, the contested line separating home and school is all but erased. These critical changes in the social scripts guiding interactions between families and schools suggest something more than a new level of parent involvement or parent education program.

Linking schools with social services demands a reorientation for both families and schools to a set of relationships exceeding the tenuous, negotiated parameters demarcating professional and private spheres. Proposals designed to extend interorganizational linkages represent a shift from a model of education and care based upon separate spheres with blurry boundaries, to an ecological perspective of family life, which considers the human context of need and locates the school as the nexus for expanded interventions. The rationale for this effort is clear and the implications are obvious: students and their families do not live in social isolation; rather, they function within cultural, economic, and geographical communities. These policy proposals suggest the importance of examining social processes and organizational conditions at the school and community level in order to promote positive interactions among families, schools, and human service agencies.

Guideposts for Planning School-linked Social Services

Observations regarding the critical importance of family-school interactions in school-linked social service programs point to two key areas: (1) the nature of parent-teacher interactions and; (2) the nature of school community. Collectively, these domains establish the structural parameters for the sustained social interactions undergirding comprehensive social service programs. Elements within each domain provide a framework for the standards and conditions promoting deep connections across families and schools, and at the same time, represent the challenges confronting school officials and policymakers as they develop comprehensive services for needy students and their families.

Parent-Teacher Interactions

The social context of school-linked social service programs suggests changes in the ways parents and teachers interact[1]. Problems considered isolated within the context of a classroom advance to a holistic examination of family functioning. The nature (depth and frequency) of parent-teacher interactions deepens to promote a fluid and constant dialogue around issues of family and school life. The professional boundaries, against which teachers formerly measured their roles and responsibilities, expand as teachers move from classroom-based instructors to community-based educators. Lives considered private move to a public, if protected, sphere as parents are encouraged to share problematic elements of the family life with teachers.

Under school-linked service arrangements, these expanded relationships are undergirded by sweeping assumptions regarding enhanced levels of trust, familiarity, and understanding between parents and teachers. To the degree that these elements accompany or follow structural changes in the organization of family-school interactions, proposals including these assumptions appear sound. However, it may be argued that these elements should be considered antecedents (or necessary preconditions) to the programmatic initiatives. That is, the social processes that help promote trust, familiarity, and understanding are themselves consequences of deep and enduring connections between families and schools. Without attending to the organizational and social processes contributing to these connections between parents and teachers, the assumption that trust, familiarity, and understanding will naturally or inevitably accompany the new expanded roles for parents and teachers may be wrongheaded.

This argument finds force when we consider the institutionalized practices and policies often characterizing family-school interactions in schools targeted for comprehensive services. The accumulated research on parent involvement in schooling suggests that conflict, distrust, and ambiguity define relationships between teachers and parents (Lightfoot, 1980, 1978; McPherson, 1972;

Waller, 1932). Boundaries are unclear. Expectations are ill defined and poorly communicated. Face-to-face interactions occur at regular and scheduled intervals: back-to-school night, parent-teacher conferences, and open house. Any additional interactions, for example a phone call to the home, tend to focus on students' misbehavior or learning problems. The reliance on structured and predictable exchanges helps construct a quiet, comfortable distance between parents and teachers. This comfortable buffer zone, protecting parents and teachers from further intrusion into their hectic, busy lives, also militates against enduring, honest, and understanding relationships. As a consequence, teachers' knowledge regarding students' family life is rooted in rumor and speculation. In the absence of processes promoting social cohesion across family and school, the image is one of anonymous and parallel, rather than intersecting, social institutions.

This portrait of family-school interactions is drawn in deliberately sharp contrast to the vivid images of trust, familiarity, and understanding sketched in the designs of a comprehensive services system. The imposition of a programmatic initiative requiring new and expanded, and to some degree, more intimate interactions between parents and teachers, seems likely to unravel in an environment that has traditionally emphasized separate spheres, anonymity, and ambiguity. In the absence of organizational conditions and social processes engendering more expressive ties between parents and teachers, a plan that presumes these elements may crumble under the weight of these assumptions.

This discussion suggests that conflict, ambiguity, and distance may undercut the central aims of school-linked social services by producing patterns of family-school interactions that maintain inconsistent and incomplete information exchanges. Consequently, comprehensive service proposals must be accompanied by a set of strategies addressing the social processes necessary to promote trust, familiarity, and understanding between parents and teachers. The interest rests with making explicit the importance of these relationships to improving the lives of students and their families.

The following proposals cut deeply into the established professional practices of teachers. Although some of these elements are embedded within particular educational programs in schools in the United States, Japan, and Germany, embracing the assumptions undergirding these arrangements requires a reconceptualization of the roles of teachers within the broader social context and students' family lives. This shift represents a fundamental precondition for school-linked social service systems in constructing the elements of a school community wrapped around a sense of shared goals, familiarity, and social cohesion.

Communication

Schools engaged in comprehensive service delivery require a vast network of communication channels for both verbal and written dialogue, to facilitate sustained information exchanges between parents and teachers. Weekly newsletters informing parents about available resources and services (including a help line); announcing special events, meetings, and testing dates; along with weekly reports keeping parents abreast of their children's academic performance, initiate a process that helps bridge the insularity and distraction often coloring family-school relations. An open door policy encourages parents to visit the school and their children's classroom as often as possible, and teachers can promote images of schools reflecting support, trust, and understanding.

The physical presence of parents at school, who would otherwise not feel welcome, is an obvious aim of broader efforts designed to use schools as the nexus for expanded family care. Altering the explicit purpose of the established routines and rituals, which typically delimit parent-teacher interactions, may also have a profoundly liberating effect on the way parents and teachers view one another. For example, rather than focus 15-minute parent-teacher conferences on student academic progress, these occasions can become something more when they are expanded and structured as a conversation about a variety of family and school topics. When these occasions for face-to-face interactions are embedded within a traditional arrangement, they engender the elements of familiarity and understanding between parents and teachers that can be brokered for other, expanded purposes and interventions.

Home Visits

When teachers measure parents' interest in education by the number of visits made to the school, the number and type of extras (backpack, glue, pencils) students bring to school, and whether or not parents return teachers' telephone calls, teachers' limited knowledge regarding the social and economic context of those families' lives can have deleterious implications for students' academic success (i.e., the teachers' expectations of the family and student). Home visits are typically made by teachers who work with learning and physically handicapped children. It is obvious that all teachers, parents, and students could benefit immeasurably by expanding this practice so that teachers' understanding of family life is not limited to speculation and rumor. Under a comprehensive service program, home visits would allow teachers to glimpse, and ultimately to understand, the challenges that face families in poverty or despair, and to begin the process of working with families and human service agencies to ensure that those needs are met through an array of available services.

Teacher Cohorts

Typically, teachers possess only shadowy knowledge of their students' family backgrounds. It may take until late spring for teachers to extend their knowledge of students' home lives beyond the information listed on parent data cards[2]. The issue of the level of teachers' familiarity and understanding of students' home lives is particularly salient under a comprehensive services model in which teachers assume responsibility for identifying and referring families for services. One response to this dilemma involves the creation of teacher cohorts comprised of two-three teachers with the responsibility for a cluster of students over 3-year intervals (1st through 3rd grade; 4th through 6th grade). Similar to the imperative of maintaining a continuity of care in medical treatment, this arrangement would provide sustained, continuous interactions between the same group of teachers, students, and their families. These social processes would contribute to enduring relationships based upon trust, familiarity, and mutual understanding—critical elements needed to promote schools and teachers as the agents of better coordinated and integrated care for needy families[3].

Conclusions

The proposals bundled under the rubric of school community are designed to promote deep and enduring connections across parents and teachers. The argument advanced here suggests that designs for linking schools and social services must take account of the nature of family-school interactions, particularly issues of trust, familiarity, and understanding. The social processes embodied in comprehensive services do not exist in isolation of the institutionalized policies and practices structuring family-school interactions. There is a subsequential need to examine more broadly and extensively issues related to school community—the sense of shared values, the nature and frequency of face-to-face interactions, and patterns of information exchange.

Neighborhood schools a century ago served residential areas that reflected a high degree of uniformity and cohesion within geographical, social, economic, and ideological boundaries. Social and technological changes have transformed many of these communities from enclaves of shared values and daily face-to-face talk, to somewhat disparate sets of interests and weak affiliations. Today, culturally diverse school communities reflect a myriad of racial, ethnic, and linguistic traditions. Against this backdrop, a flurry of recent policy proposals have engaged public schools in an effort to improve access and coordination of social services for needy families. To be sure, the social, economic, and cultural context of schooling makes these efforts a challenging task. For those families struggling with poverty and despair, poor health, emotional distress, violent or abusive family members, and a lack of

child care—there is often little energy or optimism for new ideas and programs. If schools are to perform effectively in an expanded role linking families and social service providers to one another, these initiatives must be accompanied with a new vision of both professionalism and privacy, and an understanding of traditionally separated spheres and the challenges of bridging these chasms; the issues associated with building deep connections and expressive ties across families and schools cannot wait for an epilogue.

Endnotes

1. This chapter focuses on the implications of school-linked social service programs for family-school interactions. The chapter argues that teachers assume a primary role in developing and promoting linkages (broadly construed) between schools and families. The focus on teachers, however, does not minimize or exclude the roles of nonteaching staff in establishing positive family-school relationships, including principals, counselors, secretaries, and other nonteaching staff.

2. Knowledge and familiarity can accumulate over time when teachers instruct the siblings of former students. Schools with low transiency rates provide the continuity for enhanced teacher knowledge of family backgrounds.

3. Overlaying the proposals for home visits and teacher cohorts is a notion that is compatible with school-linked social service models; it involves a reconceptualization of the professional model of teaching from one that emphasizes expert knowledge, status, and (vertical) distance between professionals and their clients, to one that promotes collaborative (horizontal) connections between teachers and their families. This community-oriented model of teaching could be made programmatically distinct in teacher training and internship programs.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on

Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Cunningham, L. L. (1990). Reconstituting local government for well-being and education. In B. L. Mitchell and L. L. Cunningham (Eds.), *Educational leadership and changing contexts of families, communities, and schools*. Eighty-ninth Yearbook of the National Society for the Study of Education (NSSE), Part II (pp. 135-154). Chicago: The University of Chicago Press. See ED 309555

Kirst, M. W. (1991, April). Improving children's services: Overcoming barriers, creating new opportunities. *Phi Delta Kappan, 72*(8), 615-618. EJ 424367

Lightfoot, S. L. (1978). *Worlds apart*. New York: Basic Books.

Lightfoot, S. L. (1980). Exploring family-school relationships: A prelude to curricular designs and strategies. In R. Sinclair (Ed.), *A two way street: Home-school cooperation in curriculum decision making*. Boston, MA: Institute for Responsive Education. See ED 201055

McPherson, G. (1972). *Small town teacher*. Cambridge, MA: Harvard University Press.

Waller, W. (1932). *The sociology of teaching*. New York: Wiley.

Wilson, J. Q. (1989). *Bureaucracy: What government agencies do and why they do it*. New York: Basic Books.

V

Professional Attitudes, Judgment, and Confidentiality: Tensions in School-linked Services

Michael E. Manley-Casimir
Mary T. Hall

Introduction

The proposal that the neighborhood school should assume a pivotal role in linking health and social services to education so that children (and their families) receive the most complete array of services available to support their educational development, presents a singularly daunting challenge for schools and for those teachers, administrators, and others who work there. The idea and practice of schools providing a variety of noneducational services to students is well established. In the United States, schools have historically acted as the locus for a variety of health services, food programs, and other social services (Tyack, 1992). So the movement to establish the school as the pivot of integrated or coordinated services is a logical extension of existing practice.

Other countries are moving in similar directions. Britain, for example, recently replaced a patchwork quilt of older legislation with a comprehensive and coherent legislative framework for the care and nurture of children—a framework that incorporates both private and public law. In Canada, extensive examinations of childrens' services have provoked new legislative initiatives and policy consolidation in the provinces of Quebec (1985), Ontario (1987), and Nova Scotia (1990). In British Columbia, the recent Sullivan Royal Commission on Education acknowledged "the school [as] the only public agency required, by law, to deliver services to all children in a given age range," and so argued that the school was "the natural site where integrated services might be planned and, indeed, delivered" by other agencies (British Columbia, 1989). The movement towards some form of integrated children's services with the public school as the hub of such services is clearly powerful and eliciting considerable support.

What, however, is distinctive about these various proposals is the explicit affirmation of the school as the central social agency responsible for inclusive social welfare directed towards children, youth, and their families. Such an affirmation, while fully understandable and perhaps desirable, presents a thicket of administrative tensions and difficulties affecting the possibility of successful implementation.

Among the many tensions and difficulties inherent in these proposals—difficulties that are well documented elsewhere (Morrill, 1992; Kirst, McLaughlin, & Massell, 1990), the tasks of achieving effective coordination and collaboration between the school and other service providing agencies seem particularly problematic because they require the development of new modes of working between and among professionals from a variety of disciplines, occupations, ideologies, and practices—professionals whose roles in the past have not necessarily required the extent or kind of close cooperation and collaboration essential to effective implementation of school-linked services.

The purpose of this chapter, then, is to explore these "across-professions interactions" (Crowson, Smylie, & Hare, 1993, p. 2) in terms of three dimensions of administrative practice—the tensions flowing from distinctive professional ideologies, norms, and attitudes; from distinctive views of the use of judgment in administrative decision making; and from conflicting approaches to the need for confidentiality in special relationships involving students and their families. The chapter begins with an argument in favor of the proposition that schools should become the pivot of service linkage on the grounds that each child is entitled to the best available array of services to maximize his or her potential; it then proceeds to examine the related tensions in across-professions interactions, and concludes by identifying the pre-conditions and strategies necessary for successful resolution of these tensions.

The Case for the Child

David Tyack (1992, pp. 28-39) attributes current reform proposals to two visions that serve as political imperatives: one is that of the nation at risk—a vision predicated on the need to ensure the maximum educational and social development of each child/student to enable the United States to maintain its international competitive advantage; the other is that of children at risk—a vision predicated on the extreme and unacceptable differences in service provision to children whose lives are blighted by familial dysfunctions such as poverty, abuse, homelessness, and poor nutrition. These imperatives drive the current proposals to establish a coordinated approach to school-linked services. While the power of these visions is clear, we start here from a conception undergirding both these visions: a conception of the child as a person uniquely

entitled to these services, not to satisfy political imperatives nor to overcome the ravages of poverty, though both are important, but rather to affirm the idiosyncratic value of each child as a person in community.

Such a view implies a redefinition of the relationship of child and family to school—referred to in earlier writings as a new social compact (Manley-Casimir, 1988). The choice of the word *compact* was made to convey the idea of an agreement characterized by common consent—one that is normative in conception and design but not primarily nor even necessarily legally enforceable or constitutionally compatible, though both might become true through processes of constitutional and legislative change or judicial affirmation.

The definition of a new social compact involving the child in the society or the student in the school inevitably derives from a conception of childhood on the one hand and a conception of society's interest in and responsibility towards children on the other. Such a conception of the role of the child and the responsibility of society to the child itself rests on implicit or explicit assumptions about the value of the child *qua* child, of the child as a young member of the community and of the child as a future adult member of the society; such a conception also rests on assumptions about the best interest of children and young people, about the standards of care necessary for physical, emotional, and spiritual health and development, about the needs and stages of maturation of the young, about the tension between dependency and independence, about the limits of childhood and beginning of adulthood (Skolnick, 1975). These assumptions all imply normative judgments about the child in the culture, the value placed on the child and childhood, and consequently implicate policy decisions flowing from such judgments.

Defining Principles and Elements of New Social Compact

Articulating a new social compact addressing the relationship of child or youth to society and of student to school requires a perspective, a framework that allows us to think systematically about the issue of rights in a coherent way. Such talk of rights flows from a general conception of relationships and entitlements of persons in a community. Martin Golding (1968) suggests that the social ideal governing the community determines the system of rights enjoyed by the members of that community. The rights are derived from the social ideal. So, for example, in the United States the U.S. Constitution, interpreted and extended by judicial interpretations, embodies the social ideal to which Americans commit themselves and to which U.S. society aspires. Golding's schema includes two types of rights: option-rights and welfare-rights. The heart of option-rights is the idea that individuals possess a limited sovereignty over property, things, and themselves. The individual's personal sovereignty is limited by the sovereignty others can claim, by duties to others, and by duty to self. Otherwise individuals may act at their option or discretion.

Welfare-rights complement option-rights. Just as freedom is central to option-rights, so equality is central to welfare-rights. Welfare-rights are essentially the rights of community members to an equitable share of the material goods and services of the community. As Golding notes:

> These are welfare-rights, and are rights to the goods of life or are derived from such rights. The great expansion of rights in modern times has taken place in respect of welfare-rights. Treitschke, I believe, has been credited with the statement that the greatest modern innovation is the idea that every person has a right to an education, and this would fall into the category of welfare-rights. (p. 543)

Clearly the problematic issue concerns full membership status in the community. Full members (usually defined as legal adults) claim all the option-rights and welfare-rights to which they are entitled by the terms of the ideal. The question at issue is to what extent do those who are less than full members enjoy the rights that the ideal imports? Traditionally, children and teenagers are considered minors, that is, not full community members and consequently not entitled to the rights enjoyed by a full member. This is a misleading and mistaken view. It is clearly difficult to argue persuasively that children should be free to exercise as a child the option-rights they will exercise as an adult. Arguments can be made that the exercise of such rights in the community and school should be developmental; that is, that children and youth should be given the opportunity to learn about such rights, the nature of rights, the duties and obligations of such rights, and to practice the exercise of these in school. When they show the capacity to exercise these rights responsibly then, the developmental view holds (Magsino, 1977-78), they should be granted the freedom to do so. Such a proposal is educationally defensible but practically difficult, because students will evince the maturity to exercise rights responsibly at different stages and ages. Further, as I have argued elsewhere, such a view of rights in the context of schools implies a radical restructuring of schools as organizations away from the definition of traditional, authoritarian bureaucracies and towards constitutional, i.e., rule and rights governed, bureaucracies (Manley-Casimir, 1980).

The issue of welfare-rights is, however, an entirely different matter. There is no reason in principle why the full array of welfare-rights should not be conferred on each and every individual child and student. In that welfare-rights imply an equitable share of the essential goods and services of the society, and in that education is one of these essential services, there is a compelling reason to extend the welfare-right of education to every student. The claim of the young to welfare-rights, however, goes beyond education; just as children and youth need quality schooling and education, so too they need

quality shelter, food, clothing, medical care, love, and emotional support, among other things. Just as hungry school children cannot concentrate on lessons and learning when their stomachs are growling, so too emotionally or physically abused youngsters cannot attend to school or homework when their homes are cells of despair and oppression.

The entitlement to the welfare-right of education is a substantive statement that involves not just issues of quantity, i.e., number of years of formal schooling, but issues of curricular choice, access to opportunity, compensatory education, quality of instruction, to mention only some of the most obvious. The entitlement also implies, however, that the material, psychological, and medical conditions necessary to benefit from educational services are also present and available; hence access to and provision of appropriate services is an essential precondition for educational success.

What, then, does such a view imply about the properties of a social compact? If we agree that children and youth are entitled to education as a welfare-right, then we are saying that the community has a responsibility to ensure that the necessary and sufficient conditions for the realization of that welfare-right are in place for each and every child. The affirmation of education as a welfare-right also carries with it the principle that the realization of the right must attend to the needs of the individual child or student; this in turn implies not uniform or same treatment but treatment that is fitting to the special needs and circumstances of the particular child.

The acceptance by the community at large of the responsibility to provide the necessary and sufficient conditions for the educational benefit of each child and that the necessary and sufficient conditions are predicated on fittingness reflects the three dominant elements in the social compact: responsibility, caring, and community. Such a view may be construed as collectivist and may as a result be anathema for some. Such is not the intent. It proceeds from the recognition that the primary responsibility for the welfare of children lies with the family; it proceeds also from the recognition that as children grow to young adulthood they have a responsibility to develop their own faculties and capacities; but it also acknowledges that for some people life is hard, unbearably hard, and under these conditions the community at large has a responsibility to care for and help those disadvantaged families and children.

At root this view holds high the value of the child in the culture. Trite though it may be, it must be so because the child is the future. And, quite aside from motives of self-interest, the child *qua* child is entitled to the affirmation of self in all ways that will foster the development of autonomy, rational action, and emotional health requisite to adulthood.

The social compact proposed here acknowledges the importance of socialization but does not permit this to be either the only or even the primary goal of public education: the primary goal of public education must be to develop

in children and youth the capacity for autonomy and a sense of personal responsibility; the capacity for rational action following critical reflection and ethical deliberation; the capacity for productive and fulfilling labour; and the capacity for emotional health, caring, and compassion for those less fortunate.

For the social compact to be achieved, for children and youth to maximize their educational development, it is practically necessary for school-linked services to be available. Several models of service delivery are possible but all imply a central role for the school.

The Central Role of the School

The need to provide youth and their families with school-linked services is compelling. Thornburg, Hoffman, and Remeika (1991) recognize the key role of schools in addressing the needs of children and families:

> Schools must adapt to the changes in family structure, values and attitudes, and the economy. They must work with the conditions and outcomes these changes have created in ways that will undoubtedly be very different than in the past and even today. Change is never easy and always takes time—time that is running out. Schools, however, must take time to make the crucial changes necessary. Collaborating with other community service programs to alter the conditions that place children, youth, families, and society at risk is a must! (p. 207)

"School leaders have increasingly realized that the education system alone has neither the ability nor political clout to address the full range of children's problems" (Jehl & Kirst, 1992, p. 97). The current demand for school-linked, integrated services emerges from present economic and social imperatives. "As the economy falters and competition with other countries intensifies, there is a great concern about the decline in children's economic and social conditions, as well as dissatisfaction with school outcomes" (p. 97). Previous attempts in the 1960s and 1970s to integrate children's services revealed that the extensive needs of children could only be met by recognizing the central role of the school and by encouraging the involvement of other agencies. The effective provision of school-linked services, therefore, implies collaboration of professionals from a variety of agencies and traditions. Effecting such collaboration requires recognition and resolution of the tensions that may arise in across-professions interactions.

Tensions in Across-Professions Interactions

The collaborative approach, while commendable, must resolve tensions between: interdependency and professional autonomy, joint ownership of decisions and professional discretion, collective responsibility and professional mandate, power dispersion and control of power, and confidentiality and information sharing. Fundamental distrust may be at the core of these interactions. Finklehor, Gomez-Schwartz, and Horowitz (1984) note "collaborations are not always easy to initiate. They often require the surmounting of institutional mistrust that has grown up over many years" (p. 214). An examination of the potential tensions in a collaborative approach may reveal clues to overcoming this mistrust.

Interdependency and Professional Autonomy

A central premise of the collaborative approach is the belief that an exchange of ideas produces solutions that agencies working independently are unable to achieve. Professionals from a range of disciplines are likely to be both encouraged and threatened by this observation. They may be encouraged to the extent that recognition of limitations is often a first step towards solutions. At the same time, their professional autonomy may be threatened by the suggestion of cooperative problem solving. Bayles (1988) notes a common feature of professionals is the autonomous nature of their work. He argues that the monopolistic view of a professional often contributes to conflict with other professions over domains. Is it possible to plan and implement a collaborative approach, while allowing professionals to maintain a degree of autonomy? The initial stages of collaboration often include drawing attention to stakeholders' mutual concerns. This exercise serves to heighten stakeholders' awareness of their interdependence and potential for mutual problem solving (Gray, 1989).

Joint Ownership of Decisions and Professional Discretion

Responsibility for identifying and solving problems rests on the participants in a collaborative approach. The competition between value systems and professional perspectives requires debate, analysis, and accommodation through negotiations, allowing for a more complete understanding of the problem. "The outcome of collaboration is a weaving together of multiple and diverse viewpoints into a mosaic replete with new insights and directions for action agreed on by all the stakeholders" (Gray, 1989, p. 14). The role played by the school principal is crucial to the creation of effective collaborative decision making (Jehl & Kirst, 1992). So much will rest on the capacity of the principal to recognize and value the discretion professionals bring to their definitions of self and to the task at hand.

Manley-Casimir (1990), following Davis (1969), argues that the exercise of discretion is central to administrative decision making, and Bayles (1988) argues that professional autonomy is dependent to some extent on the exercise of discretion. Adler and Asquith's (1981) paper on discretion and power reveals the inherent tension between professional discretion and shared decision making.

> Although the professions have extremely wide discretion, the power and status of the professional groups concerned and the esoteric nature of their professional knowledge have, on the whole, ensured that professional prerogatives have gone unquestioned. (p. 15)

A collaborative approach does not imply that professionals forfeit their exercise of discretion. The challenge involves achieving a balance of professional discretion and shared decision making. Professionals from a range of school-linked, integrated services need to meet this challenge in their pursuit of a common goal—to address the needs of children and their families. Successful collaboration requires mutual respect for individual values and professional ideologies.

The influence of individual values and professional ideologies is central to both joint decision making and discretionary decision making. The collaborative approach attempts to reconcile individual values and professional ideologies in pursuit of a common purpose—to clarify the problem and offer direction for solutions.

> When stakeholders hold conflicting values and widely differing perspectives on the problem, initial interactions must be designed to promote valid exchange of information and to search for common ways of framing the problem. (Gray, 1985, p. 925)

This view is consistent with Trute, Adkins, and MacDonald's (1992) observation that a shared ideology among key professionals is critical to coordinated services.

In a similar vein, a growing body of research recognizes the influence of values on the use of discretion in administrative decision making. Vickers (1965), for example, notes "the dominance of governing human values must be taken for granted in any study of the process; and it is these values which select and in part create the 'facts' which are to be observed and regulated" (p. 96). Begley and Leithwood (1989) identify the significant influence of personal values on administrative decision making. Greenfield (1986) and Hodgkinson (1986) are strong proponents for further research focusing on the value aspects of administrative behaviour. A closer examination of the

influence of values in both joint and discretionary decision making will provide a key to relieving the tensions between these two approaches.

Collective Responsibility and Professional Mandate

> Ownership of the collaboration must be shared within the group. If the process of developing school-linked services is seen as an effort to fulfill a particular agency's agenda at the expense of another's, the process will fail. (Jehl & Kirst, 1992, p. 100)

Heath and McLaughlin (1987) note successful collaborative efforts must overcome "entrenched notions of 'turf' and entitlements" (p. 580) by bureaucratic and professional groups. Collaboration involves negotiation of a new set of relationships among the stakeholders (Gray, 1989). Shared responsibility is central to these relationships according to Jehl and Kirst (1992). They suggest collegiality as a possible resolution of the tension between professionals accustomed to fulfilling their own mandates and shared responsibility. The development of a common philosophy will contribute to collegiality.

Trute et al. (1992) examine the differences in philosophy between police, child welfare, and community mental health in regards to child sexual abuse. Their concluding remarks offer a possible resolution to this third tension. "The challenge is to create an interdisciplinary atmosphere where these differences in approach can be resolved, and where each professional group can fulfill its professional mandate, while finding a course of intervention that serves in the best interest of the victimized child and his or her family" (Trute et al., 1992, p. 367).

Power Dispersion and Control of Power

At the outset, it is critical for a school-linked coordinated service program to consider the power balance among stakeholders. Gray and Hay (1986) caution:

> Powerful stakeholders who perceive they have little or no interdependence with others will undoubtedly try to preserve their individual control over the domain and will resist collaborative interventions that aim to balance power among the stakeholders. (p. 99)

Gardener (1992) identifies equal partnerships between stakeholders as a key issue in the development of school-linked integrated services. "Increasingly, management will be about horizontal partnerships among agencies and firms that do not control, but depend upon, each other" (p. 91). Power dispersion allows stakeholders greater control over the problem (Gray, 1985).

Gray argues, however, that equal power distribution is neither necessary nor desirable, as it can lead to inaction. Gray and Hay (1986) identify expertise, control of the public policy process, and resources as possible sources of power to support or oppose the project; in addition, participants in collaboration gain a degree of power.

Confidentiality and Information Sharing

A fifth tension present in across-professions interactions concerns the issue of confidentiality in dealing with children, youth, and their families in the context of school-linked services. The tension arises because human service professionals are usually bound both by legal duties and professional norms of confidentiality in their relationships with clients. The sharing of secrets between client and professional lies at the heart of the confidential relationship. As Bok (1988) notes:

> Confidentiality refers to the boundaries surrounding shared secrets and to the process of guarding these boundaries. While confidentiality protects much that is not in fact secret, personal secrets lie at its core. The innermost, the vulnerable, often the shameful: these aspects of self-disclosure help explain why one name for professional confidentiality has been "the professional secret." (p. 231)

Without knowledge of secrets shared, professionals are unable to discharge their roles effectively. So, in the context of school-linked services, where a number of different agencies and associated professional individuals are involved, the problem of information sharing becomes acute and necessarily implicates the issue of confidential information.

A joint report of Joining Forces, *Confidentiality and Collaboration: Information Sharing in Interagency Efforts*, provides an excellent discussion of these issues, identifies the various dimensions of the problem and the tensions at work, yet concludes that "it is possible to develop means of exchanging information that are effective and practical on a wide scale, while still respecting legitimate rights to privacy" (American Public Welfare Association, Center for Law and Social Policy, Council of Chief State School Officers, & Education Commission of the States, 1992, p. 2).

The central principle permitting interagency information sharing and collaboration is that of informed consent. Providing the individual about whom confidential information is held gives informed consent for the release of that information to specific people, for specific purposes, the duty of confidentiality can be legitimately breached. Such a practice must satisfy federal and state law but is workable. "Some of the most promising interagency approaches are ones that affirmatively embrace the idea that

informed consent for the release of information is part of empowering the individual as an active participant in resolving personal and family issues" (American Public Welfare Association, 1992, p. 2).

The provision of medical services to students through school-based clinics raises more complex issues of confidentiality and personal privacy. Since many students are legal minors, it is usual for informed consent to come from parents or legal guardians. Courts and legislatures have, however, recognized the need to treat adolescents differently so they can receive essential medical services on an independent and confidential basis (English & Tereszkiewicz, 1988, p. 7). States permit minors to consent to medical care in a variety of situations; provisions extend both to the emancipated minor (one who is essentially independent) and to the mature minor (one who is capable of making an informed decision). In these cases informed consent can be given by the minor. English and Tereszkiewicz advise practitioners to take the minor's age, intellectual or cognitive maturity, and ability to understand the information to be disclosed into consideration in evaluating his or her capacity to give informed consent.

The Challenge of Effective Interagency Collaboration

An increasing body of literature documents the need for a collaborative approach in the provision of comprehensive support for youth and their families. "The problems faced by children and families are simply too large and too complex to be taken on alone by any one system" (Levy & Shepardson, 1992, p. 46). Collaborative planning and subsequent collaborative action is necessary to address the diverse needs of children (Thornburg et al., 1991). A high level of communication and cooperation is critical to a successful collaborative relationship (Dryfoos, 1991). Jehl and Kirst (1992) point out that schools play a pivotal role in addressing the multiplicity of children's issues evident in our society. Schools, however, are unable to address these issues alone—they must collaborate with other community agencies.

> For school-linked service efforts to be effective, the participating agencies will have to change how they deliver services to children and families and how they work with each other. (Larson, Gomby, Shiono, Lewit, & Behrman, 1992, p. 9)

The possibility of school-linked services being successful in focusing the variety of health and social services on the needs of children, youth, and their families will clearly depend on effective interagency collaboration. Central to the success of this collaboration is the leadership of the individuals representing the various organizations involved, but particularly crucial is the

leadership role of the principal of the school in effecting a culture fostering genuine collaboration (Rallis, 1990, pp. 198-205).

Collaboration, as Barbara Gray advances, requires as a precondition the recognition by the stakeholders in the situation that they have a shared interest in advancing their joint vision (1989, p. 6). In the case of school-linked services, such interest must involve the marshalling and coordination of the best available services to support and enhance the general welfare of the child and family and the particular educational progress of the student in school. Such a joint vision, or something very similar, must form the joint purpose of collaborating agencies. Furthermore, the agency representatives must not only agree to the joint vision in principle, but must also develop and sustain a clear and abiding commitment to this sense of purpose. Without this sustained and dedicated sense of purpose the collaboration will not last. Possible key stakeholders in a collaborative approach to school-linked services include representatives from education, parent groups, business, religious groups, health and social agencies, the criminal justice system, and youth. Opportunities for collaboration involve two categories: resolving conflicts and sharing a vision. Gray identifies the following key elements as essential to successful collaboration:

- the stakeholders are interdependent,
- solutions emerge by dealing constructively with differences,
- joint ownership of decisions is involved,
- stakeholders assume collective responsibility for the future direction of the domain, and
- collaboration is an emergent process. (Gray, 1989, p. 11)

The weaving together of different viewpoints and perspectives in the sense of a joint vision is essential to effective collaboration. Such mind-meeting and perspective-acceptance generates a sustaining ethic of legitimacy to the joint enterprise, prerequisite to the next step—the marshalling of resources from diverse sources in support of the common sense of purpose—the best possible social support for the educational development of the youth of today, the citizens of tomorrow.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed

by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Adler, M., & Asquith, S. (1981). Discretion and power. In M. Adler & S. Asquith (Eds.), *Discretion and welfare* (pp. 9-32). London: Heinemann Educational Books.

American Public Welfare Association, Center for Law and Social Policy, Council of Chief State School Officers, & Education Commission of the States. (1992). *Confidentiality and collaboration: Information sharing in interagency efforts*. Denver: Education Commission of the States. ED 345402

Bayles, M. D. (1988). The professions. In J. C. Callahan (Ed.), *Ethical issues in professional life* (pp. 27-35). Oxford: Oxford University Press.

Begley, P. T., & Leithwood, K. A. (1989). The influence of values on the practices of school administrators. *Journal of Educational Administration and Foundations, 4*(2), 26-39.

Bok, S. (1988). The limits of confidentiality. In J. C. Callahan (Ed.), *Ethical issues in professional life* (pp. 230-239). Oxford: Oxford University Press.

British Columbia. (1989). *Royal Commission on Education: A legacy for learners*. Victoria: Queens Printer.

Davis, K. C. (1969). *Discretionary justice*. Baton Rouge: Louisiana State University Press.

Dryfoos, J. G. (1991, April). School-based social and health services for at-risk students. *Urban Education, 26*(1), 118-137. EJ 427907

English, A., & Tereszkiewicz, L. (1988). *School-based health clinics: Legal issues*. San Francisco: National Centre for Youth Law.

Finklehor, D., Gomez-Schwartz, B., & Horowitz, J. (1984). Professional's responses. In D. Finklehor (Ed.), *Child sexual abuse: New theory and research* (pp. 200-215). New York: Free Press.

Gardener, S. L. (1992, Spring). Key issues in developing school-linked, integrated services. *The Future of Children: School Linked Services, 2*(1), 85-94. EJ 448074

Golding, M. P. (1968, October). Towards a theory of human rights. *The Monist, 52*(4), 521-49.

Gray, B. (1985). Conditions facilitating interorganizational collaboration. *Human Relations, 38*(10), 911-936.

Gray, B. (1989). *Collaborating*. San Francisco: Jossey-Bass.

Gray, B., & Hay, T. M. (1986). Political limits to interorganizational consensus and change. *The Journal of Applied Behavioral Science, 22*(2), 95-112.

Greenfield, T. B. (1986, Summer). The decline and fall of science in educational administration. *Interchange, 17*(2), 57-90. EJ 338357

Heath, S. B., & McLaughlin, M.W. (1987, April). A child resource policy: Moving beyond dependence on school and family. *Phi Delta Kappan*, 576-580. EJ 352270

Hodgkinson, C. (1986, April). *The value bases of administrative action*. Paper presented at the Annual Meeting of the American Educational Research Association, San Francisco. ED 271820

Jehl, J., & Kirst, M. (1992, Spring). Getting ready to provide school-linked services: What schools must do. *The Future of Children: School Linked Services, 2*(1), 95-106. EJ 448075

Kirst, M. W., McLaughlin, M., & Massell, D. (1990). Rethinking policy for children: Implications for educational administration. In B. L. Mitchell & L. L. Cunningham (Eds.), *Educational leadership and changing contexts of families, communities and schools* (pp. 69-90). Eighty-Ninth Yearbook of N.S.S.E. Chicago: National Society for the Study of Education. See ED 323637

Larson, C. S., Gomby, D. S., Shiono, P. H., Lewit, E. M., & Behrman, R. E. (1992, Spring). Analysis. *The Future of Children: School Linked Services, 2*(1), 6-18. EJ 448068

Levy, J. E., & Shepardson, W. (1992, Spring). A look at school-linked service efforts. *The Future of Children: School Linked Services, 2*(1), 44-55. EJ 448071

Magsino, R. (1977-78). Students rights in Canada: Nonsense upon stilts? *Interchange, 8*(1-2), 52-70.

Manley-Casimir, M. E. (1980). The school as a constitutional bureaucracy. In D. B. Cochrane & M. E. Manley-Casimir (Eds.), *The development of moral reasoning* (pp. 69-81). New York: Praeger.

Manley-Casimir, M. E. (1988). *Responsibility and caring in community*. Unpublished report submitted to the Royal Commission on Education, Simon Fraser University, Burnaby, British Columbia.

Manley-Casimir, M. E. (1990, April). *Taking the road not taken: Reframing educational administration for another day*. Paper presented for International Intervisitation Programme in Educational Administration, Manchester.

Morrill, W. A. (1992, Spring). Overview of service delivery to children. *The Future of Children: School Linked Services, 2*(1), 32-43. EJ 448070

Nova Scotia. (1990). *Services to Children and Their Families Act*, Chapter 5.

Ontario. (1987). *Child and Family Services Act*. Statutes of Ontario, Chapter 55.

Quebec. (1985). *Youth Protection Act*. RSQ Chapter (p. 34.1).

Rallis, S. F. (1990). Professional teachers and restructured schools: Leadership challenges. In B. Mitchell & L. L. Cunningham (Eds.), *Educational leadership and changing contexts of families, communities and schools* (pp. 184-209). Eighty-Ninth Yearbook of N.S.S.E. Chicago: National Society for the Study of Education.

Skolnick, A. (1975). The limits of childhood. *Law and Contemporary Problems, 39*, 38-43.

Smylie, M. A., Crowson, R. L., & Hare, V. C. (1993). Administrative issues in coordinated children's services: A Chicago case study. In R. Levin (Ed.), Greater than the sum: Professionals in a comprehensive model (pp. 117-128). Washington, DC: ERIC Clearinghouse on Teacher Education.

Thornburg, K. R., Hoffman, S., & Remeika, C. (1991, January). Youth at risk; society at risk. *Elementary School Journal, 91*(3), 199-208. EJ 429052

Trute, B., Adkins, E., & MacDonald, G. (1992). Professional attitudes regarding the sexual abuse of children: Comparing police, child welfare and community mental health. *Child Abuse and Neglect: The International Journal, 16*(3), 359-368. EJ 450106

Tyack, D. (1992, Spring). Health and social services in public schools: Historical perspectives. *The Future of Children: School Linked Services, 2*(1), 19-31. EJ 448069

Vickers, G. (1965). *The art of judgment: LA study of policy making*. London: Chapman & Hall.

VI

Financial and Economic Policy Issues in Coordinated Children's Services

James G. Ward

Public Policy Issues in Coordinated Children's Services

Today, we recognize that different governmental units at different levels of government, as well as on the same level, need to work together more closely than they have in the past to serve children and the common good. This extends well beyond the traditional bounds of schooling and includes social welfare policies and programs that also serve children. The Appalachia Regional Laboratory (1992) justifies a coordinated approach to children's services based on two certainties:

- If multiple problems of children are not addressed, the chances of successful learning diminish.
- Schools cannot solve such complex issues alone. (p. 1)

The goals, they argue, of such program directions are:

- More efficient uses of social service and health dollars and better access to services.
- The idea that solving students' health and social ills will lead to better academic performance.

Thus, the interest in coordinated children's services, with schools as the focal point for service delivery. Two important concepts are the idea of children's services being linked through the public agency of the school and the collaboration among agencies for coordinated service delivery, rather than the integration of services through a single public agency.

Important public policy issues are raised concerning the financing of coordinated social services for children. Will such programs cost more? If so, where will the funds come from? How can financing coordinated services

across multiple agencies be accomplished? Will new intergovernmental mechanisms or arrangements be necessary? These are all critical questions that have not been addressed. The purpose of this chapter is not necessarily to provide dispositive answers to each of these questions, but to develop the framework for answering them within the current policy-making environment. These questions will be briefly discussed again at the conclusion of this chapter.

The Political Economy of Coordinated Children's Services

A sluggish national economy and a general antigovernment feeling have combined to restrain resources available to state and local governments in the United States. The provision of publicly funded medical care has come to occupy the attention of public budgeters and there has been considerable alarm expressed of whether soaring medical costs will bankrupt governments. The net effect has been that,

> In this environment, no discretionary spending fared well. In many states, school aid increased less than planned, benefits for the poor were cut, appropriations for higher education decreased in nominal dollars, and funding for many other programs suffered. (Gold & Ritchie, 1992, p. 23)

Gold and Ritchie (1992) found that 14 states actually reduced intergovernmental aid to local governments in 1991, and that these reductions were severe in 4 states: Illinois, Maryland, Massachusetts, and New York (pp. 28-34). California, for example, shifted a major part of the responsibility for provision of mental health, public health, indigent health, and other social service programs from the state to counties, with additional sales tax and vehicle license tax revenue provided for counties. The problem, however, is that $2.212 billion in costs were shifted from the state to counties, with only $2.191 billion in new revenue provided, leaving a $21 million shortfall for California county governments (Gold & Ritchie, 1992, pp. 33-34). Gold and Ritchie call this approach "fend-for-yourself federalism" (p. 41). This does not provide an optimistic backdrop for the funding of coordinated children's services.

There seems to be a high degree of interest in altering current intergovernmental relations in order to achieve financing efficiencies at all governmental levels. Former Congressional Budgeting Office Director Alice Rivlin (1992) has proposed some major changes in the American federal system and intergovernmental arrangements. She proposes three changes in intergovernmental relations and financing:

> First, the federal government takes responsibility for health care financing. It enacts some system that covers everyone for basic health services. . . . Second, the states, not the federal government, take charge of accomplishing a productivity agenda of reforms designed to revitalize the economy and raise incomes. These include education and skills training, child care, housing, and infrastructure and economic development. . . . Third, the states, with the blessing and perhaps the assistance of the federal government, strengthen their revenue systems by adopting one or more common taxes (same base, same rate) and sharing the proceeds. (pp. 319-320)

If enacted, this proposal would leave the financing of coordinated children's services a function of the state governments. The shared revenue source to which Rivlin makes reference is a value-added tax (VAT), which would have an advantage over current sales taxes in that the VAT would make it possible to tax services (Rivlin, 1992, p. 320). Of course a broader array of services could also be taxed using the current retail sales tax, if any state so desired. A VAT, commonly used in most Western European nations, is a multiple-stage sales tax where a tax is imposed at each stage of production of a good or service on the "value added" at that stage. The value added is the increment in price of the product that is added at each stage as the good or service moves from raw material through various manufacturing stages to the wholesaler and then to the retailer and on to the consumer (Musgrave & Musgrave, 1984, p. 441). What Rivlin is suggesting is a national VAT with proceeds distributed to the states. Rivlin also argues that an advantage of her proposal is that it places many services at the level where "government [will be] most likely to respond, and citizens will be clear who is in charge, where to pressure for performance, and whom to blame for bad results" (Rivlin, 1992, p. 320).

Relieving state governments of responsibility for financing health care will lift a great fiscal burden from them. This will allow them more degrees of freedom in financing other public services.

Coordinated Children's Services as Social Investment

Developing a rationale for funding coordinated educational and social services for children requires thinking of expenditures for such services as social investment. Thurow (1992) argues that in a global economy such as we now have a worker only has two things to offer: skills or a willingness to work for low wages (p. 52). He goes on to argue also that what will distinguish the relative abilities of nations or regions to compete effectively in the global economy will not so much be the quality of education provided for the top 25%

or so of the population, although that is important for a variety of reasons, but what will be the quality of education provided for the bottom 50%. This is because providing a quality education for the bottom 50% is essential for achieving production of the best and least costly products, which is the key to economic success in a global economy (p. 52). He cites the example of the German education and apprentice system where excellent education is achieved at the middle levels and the quality of work teams is emphasized (pp. 54-55). He also cites Germany's progressive social welfare policies, which provide many of the same kinds of services we are referring to as coordinated children's services (p. 36).

Another issue that Thurow does raise that merits some further discussion is the distinction between provision of services and delivery of services. While there is no argument that the public sector has a responsibility to make the social investment to provide comprehensive services for children, he argues that schools cannot solve all social problems and that the major responsibility of schools should be in making sure that children are well educated. He maintains that the

> Front lines of the war on crime, drugs, teenage pregnancy, or housing desegregation should be established elsewhere. Better nutrition, drivers' training, and sports are secondary. (Thurow, 1992, p. 279)

The basic question is who should have the responsibility for both coordinating and providing social services for children. Many argue that the public school is the one public agency that is best prepared to be the focal point of coordinated social services for children because the schools have custodial care of children for such large blocks of time on a daily basis during the school year. Others, like Thurow, maintain that the schools should focus on education and that some other public social agency might best take responsibility for coordinating social services to children.

Nonetheless, I do not think that there is any argument that coordinated social services for children must be provided and delivered publicly. The argument is clear that as a nation we need to invest properly in our children for a variety of reasons, not the least of which is to allow us the base for which to build and sustain a competitive economy that can maintain the historic high standard of living that the United States has enjoyed. The choice is high skills or low wages and the provision of appropriate social services for all children through public agencies will provide critical assistance to moving in the direction of high skills.

The major argument for both public provision and public delivery of coordinated children's services is that such services benefit the entire society and that these services should be offered in such a way that no child needing services is excluded from services because of the peculiar status of the child's

family in terms of income or residential choice. As such, services are what economists call a social good and are best provided through the public sector.

Budgetary Issues in Coordinated Children's Services

Quite apart from the issues in providing resources for coordinated children's services, there are a number of budgetary issues. Once resources are identified, how can they be more effectively, efficiently, and equitably distributed? These questions suggest some obvious policy issues that need to be addressed.

Comprehensive vs. Means-tested Programs

If coordinated programs for social services for children are developed and funded through the public sector, should they be available to all children or should there be some family income threshold below which a child must fall in order to be eligible to receive services? Comprehensive services are likely to be more effective and will also help eliminate any stigma that might be attached to the receipt of such services, but it is likely to be more costly and result in duplication with other public and privately provided social services. Means testing, although not difficult to do, does increase the administrative overburden of program management.

Weighted Pupil vs. Categorical Programs

If funds are provided to local public schools by state or federal authorities to fund programs of coordinated social services for children, which is one mechanism for service provision and delivery, should some sort of pupil weighting scheme based on cost accounting of providing services be used, or should categorical programs for specific services be used. Weighted pupil programs use the normal state grant-in-aid formula for elementary and secondary education, but simply assign a weight greater than 1 for pupils with special needs based on the nature of their special need and the estimated additional cost of providing appropriate services. For example, a pupil determined to be twice as costly as a regular child to educate appropriately would be assigned a pupil weighting of 2 and would receive two times as much in state financial aid. Categorical programs, by contrast, operate outside the general grant-in-aid program and generally provide specific packages of aid for particular categories of students with special needs. Weighted pupil programs might encourage the integration of coordinated children's services with other school programs, but might result in a decrease of funds for educational programs if the total panoply of programs is underfunded. Categorical funding leaves individual programs vulnerable to financial instability over time and tends to pit one program against another.

Issues of Power and Empowerment—Who Controls?

Questions about who controls are always present in consideration of such issues. The present discussion has as a basic assumption that public schools will be the coordinating agency and the locus of social programs for children. Is this a reasonable assumption? How will other public and private social agencies react to this? How much local control over service levels and delivery systems will be permitted? How much local variation will be expected or allowed? There is a clear and present danger that the level and quality of social services for children could vary greatly by school district as do present quality and funding levels of educational services. Will affluent communities provide better quality services for children while promoting public policies that deny such services to children in less affluent areas? Are we creating another set of inequalities in our civic life?

Generating Fiscal Support

As discussed above, state and local governments are experiencing fiscal stress and many domestic social programs in the United States are woefully underfunded. How can we convince voters and their representatives that an investment in coordinated social services for children is a worthwhile and necessary expenditure of public funds? More to the point, how can we convince the public that a tax increase for such services is in the public interest? The fact of the matter is that expanded services for children will not have any direct benefit to a very large share of the children of individuals who vote in the highest proportion and who are politically active. Those in the middle- and upper-income levels are likely to reject public expenditures for these purposes because spending for coordinated children's services will result in tax increases and those paying the additional tax burden will enjoy little or no direct benefit. In what Galbraith calls "The Culture of Contentment," "the substantial role of the government in subsidizing this well-being [of the middle and upper classes] deserves more than passing notice. Where the impoverished are concerned . . . government support and subsidy are seriously suspect as to need and effectiveness of administration and because of their adverse effect on morals and working morale" (Galbraith, 1992, p. 14).

What Galbraith is suggesting is that we often overlook the government guarantees that protect the access of the more affluent to certain desired goods and services, but we deny them to the less fortunate citing the lack of funds available for such purposes, the general unworthiness of the poor for access to such services, and the lack of effectiveness of those services to meet desired ends. No one makes these arguments about parallel public subsidies for the well off, such as property tax and mortgage interest deductions on expensive homes, government insurance for large bank accounts, and lucrative employee fringe benefit packages.

Christopher Jencks (1992) documents the complexity of generating public support for social welfare programs and suggests that we need radical rethinking about a number of social policy issues. He especially stresses the need to attend to the public perceptions of social welfare policy in trying to build public support for reform.

The argument here is simple. It will be exceedingly difficult to convince voters and policymakers that increased general funding for publicly provided coordinated social services for children is a sound social investment. For many people, the public funding of such services will be viewed as another give away program for the undeserving. It is likely that such initiatives will be opposed and, at best, some sort of underfunded system of social service vouchers with wide user choice will be suggested.

Public Policy Questions

Within the framework provided above, we now return to some of the questions raised at the beginning of this chapter. There is no question that a coordinated system of social services for children provided through the public sector, with a focus on the public school, would require public expenditures that far exceed what we now devote to such purposes. To be sure, some economies of scale would result from increased coordination and decreased duplication of services, but the unmet service need would indicate increased spending. The increased funding would need to come from a broad-based tax on either income or consumption, or some combination. Rivlin (1992) has suggested some changes in intergovernmental fiscal relations with reassignment of both service delivery and service provision of selected social services and this may be a partial answer. Financing across multiple agencies can probably best be accomplished through a clear recognition of the responsibility of the state for coordinated children's services and unambiguous assignment of responsibilities to particular agencies for service delivery. As has been discussed above, the public school is a logical locus for service coordination, but a variety of other agencies are involved. However, there must be a clear path of responsibility and appropriate accountability systems. Finally, new intergovernmental arrangements will be necessary. Our current uncoordinated and incomplete system of social services for children cannot carry the burden of a comprehensive system to meet social needs. Change is inevitable.

A reasonable policy direction to follow may be to consider Rivlin's proposal for altered intergovernmental relations. Certainly, the health care policy issue looms large on the American public policy agenda. If responsibility for health care were to be assumed by the federal government, fiscal pressure on state and local governments would be eased. If coordinated social services

for children were to become less of an isolated issue and combined with related issues in a social productivity agenda, including health care reform and welfare reform, there might be more support generated at the state level to precipitate action. These proposals do not attack the revenue generation issue or issues of malignant neglect by a large sector of the populace, but they may show the way to progress in this critical area of social policy.

Finally, Jencks (1992) makes a compelling argument that the key to all social welfare services is the ability to generate a sufficient number of jobs in our economy to employ those who are not working, to provide the poor with education and work skills to succeed in those jobs that are available, and to guarantee access to health and other social services for the poor. Such a comprehensive approach could change the course of the debate about coordinated social services for children and make the provision of such services separate from other social services unnecessary. The focus of schools then returns to education.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Appalachia Regional Laboratory. (1992). Health, social services to families: Can schools provide the crucial link? *The Link 11*(2), 1-3.

Galbraith, J. K. (1992). *The culture of contentment*. Boston: Houghton Mifflin Co.

Gold, S. D., & Ritchie, S. (1992). State policies affecting cities and counties in 1991: Shifting federalism. *Public Budgeting and Finance 12*(1), 23-46.

Jencks, C. (1992). *Rethinking social policy: Race, poverty, and the underclass*. Cambridge, MA: Harvard University Press.

Musgrave, R. A., & Musgrave, P. B. (1984). *Public finance in theory and practice*. New York: McGraw-Hill Book Co.

Rivlin, A. M. (1992). A new vision of American federalism. *Public Administration Review, 52*, 315-320.

Thurow, L. (1992). *Head to head: The coming economic battle among Japan, Europe, and America*. New York: William Morrow and Co., Inc.

VII

A Look Back to the Futures of Children: Developing a Shared Vision of Early Intervention

Richard P. Brinker

The presidential campaign and election of 1992 will perhaps best be remembered for the extent to which the U.S. electorate demanded an engagement with issues about how public policies affected people's daily lives. Discussion of the economy quickly led to discussion of employment, which led to discussion of education. Specifically, all candidates were challenged to show how schools would be changed to prepare the work force of the future and how the broader society would retrain the current work force displaced from traditional manufacturing jobs. A parallel discussion focused on the costs of health care, disparities in health, and the relation of both to the future of the nation. The important part of the election of 1992 was that it engendered discourse that explicitly recognized the systemic nature of the problems of health, education, the economic well-being of the country, and the social welfare of citizens.

This chapter will review the notion that schools should be the hub of comprehensive societal efforts to construct the future of the United States. The title refers not to the series of motion pictures with "Back to the Future" in the title but rather to the title of a book by Nicholas Hobbs published in 1975, *The Futures of Children*. That book was commisioned by then Secretary of Health, Education, and Welfare Elliot Richardson, to examine the ways in which children were classified to receive special services or forms of treatment. The conclusion was that schools should provide the center of services designed to educate and support the general development of children within their context of family and community. However, schools have not changed in that way over the ensuing 18 years.

In this chapter, I will review as a case study the efforts to integrate services to children prior to school age. The comprehensive system of early intervention for children who have known conditions that jeopardize their development or are at high risk for developmental delay and subsequent school failure is required by the 1986 revision of the Education of All Handicapped Children

Act and is commonly referred to as PL99-457. This legislation calls for not only a comprehensive system of services but also the inclusion of families as partners in the provision of these services. Thus it provides an interesting test case for the systemic integration of previously uncoordinated resources that may capitalize on the systemic consciousness emergent in the United States.

Schools and the Future of Children

Lisbeth Schorr (1988) has called the schools the balance wheel of society. They seem to have that status because they are both communities within themselves and they are also the most well dispersed of societal institutions within communities in the United States. These are physical realities rather than functional or psychological realities of either type of community. However, perhaps new functional and psychological realities can be forged from the physical realities of the relationship of schools to communities. Because schools are in communities there is hope that they can become the part of the community to which families turn first for support in meeting children's health, social, and developmental needs in addition to their educational needs. This was the insight reached by Nicholas Hobbs nearly 20 years ago when he lead a comprehensive study of the way children are classified in the United States (1975a,b,c). His study of classifications of children led to the conclusion that the systems used to classify children did a poor job in terms of linking classifications to remedies. He argued that local public schools could provide the framework for improving the match between children's needs and available services if they were reconceptualized as American society's agency for children. Hobbs states:

> A long tradition sustains a helping strategy that concentrates professional assistance on the immediate problem of the individual child to the neglect of the family, school, and community. We call for a shift in strategy to support the family not supplant it; to revive neighborhoods, not condemn them, to expand the role of the public school, not limit it. The challenge is to make effective the units of society that most help children grow up. (1975c, p. 279)

Are we as a society capable of envisioning schools with even greater responsibilities for children when many feel that schools should become more narrowly focused on the basic academic goals of education? Schorr (1988) argues that the increased integration of schools with communities and the development of a common commitment by parents, teachers, and school administrators are in fact closely associated with the academic success of the students. If schools were to be redefined as the places from which resources

emanated to strengthen the health of children and to bolster the psychological resources of families, then the schools may have greater success in achieving goals of academic excellence as well. Specifically, children would be ready to learn because they and their parents had already developed trust, support, and guidance in the early stages of development so that the role of student focusing on academic work would be assumed within existing supportive relationships. The most radical form of this vision would be the dispersal of pediatricians, child welfare workers, family therapists, and community liaisons into schools so that they could work as a team with parents to support the child's development and education fully.

Goals 2000: Every Child Enters School Ready to Learn

Reforming education to provide increased access to early intervention programs like Head Start and programs for infants with disabilities is a goal that is endorsed across the political spectrum. This is a commendable goal, capitalizing on both the empirically demonstrated benefits of early intervention and the community involvement inherent in the Head Start and early intervention efforts (Consortium for Longitudinal Studies, 1983; Guralnick & Bricker, 1987; Robinson & Choper, 1979; Zigler, 1979). However, communities have changed in important ways since the inception of Head Start and the controlled studies demonstrating the impact of such programs (Clarke-Stewart & Fein, 1983; Wilson, 1987). In addition, the nature of children needing early intervention services is changing.

First, the communities have changed from racially segregated inner-city areas that at the same time were socioeconomically integrated, to communities that are both racially and socioeconomically segregated. Thus, individuals who have been chronically poor for generations now comprise the majority of people living in the public housing projects of inner-city America (Wilson, 1987; Kotlowitz, 1991). This has produced a psychology of despair in which the value of education, long-term employment, living within the law, and ultimately life itself is reduced (Garbarino, 1990; Testa & Lawlor, 1985; Testa & Wulczyn, 1980).

Environmental adversity has biological consequences for children (Avery, 1985; Baumeister, Kupstas, & Klindworth, 1990). Infant mortality in the United States is higher than in 21 other industrialized nations (National Commission on Children, 1991). Teenage pregnancy and low birthweight also demonstrate remarkable disparity in our standing among industrialized nations given the wealth and international influence of the United States. Over 20 years ago there was a recognition that the type of developmental delays that were related to social disadvantages were different from those related to organic factors (Zigler, 1967). However, given the difficulty of

accessing prenatal care, the increasing incidence of use of drugs, especially cocaine, by pregnant women, and the generally higher incidence of premature or low birthweight babies among women living in poverty, the risk of organic damage has increased (Schutter & Brinker, 1992). The confounding of organic damage with ongoing environmental adversity increases the probability of developmental disabilities ranging from severe retardation to mild learning disabilities (McCormick, 1990; Sameroff & Chandler, 1975; Werner, 1990).

In order to prevent or ameliorate the effects upon development of adverse biological events compounded with adverse environmental events, it is necessary to identify infants and young children for whom appropriate services can be provided (Meisels & Wasik, 1990; Upshur, 1990). However, prior to school enrollment there is no common, ongoing point of contact between families with young children and any societal agency. While over 90% of children in the United States are born in hospitals, after discharge there is no consistent context within which developmental problems can be identified. Health service providers are the most likely to be in a position to have contacts with young children and their families prior to school age. However, health services are very loosely organized in a network primarily of private practitioners loosely affiliated with hospitals. While a relatively small number of practitioners are affiliated with public health clinics, these and the private health care providers are accessed by families primarily for acute care addressing an active illness. Thus, in a study of five large urban areas in the United States, 25% of the children with severe mental retardation were not identified until 5 years of age (Palfrey, Singer, Walker, & Butler, 1987). The educational level of the mother was the best predictor of the age at which the child was identified to have severe mental retardation. Thus, patterns of health service utilization among disadvantaged families leads not only to increased risk for developmental disabilities, but also to a reduced probability of identification. Without early identification, early intervention services to prevent or ameliorate the severity of disabilities is impossible. For such identification to occur the acute care access to families of the health service system must be integrated with the longer term involvement that underlies the educational system (Gilkerson, Gorski, & Panitz, 1990).

Mandating Comprehensive Services

In 1986, PL 99-457 provided states with an incentive to extend educational and related services to children with disabilities who were below the mandatory school enrollment age. To continue to participate in the Individuals with Disabilities Education Act, states were required to develop a comprehensive system of early intervention for those children from age 3 to 5 years who were defined as eligible. In addition, under Part H of the legislation, states that already had a comprehensive preschool system for 3 to 5 year-old children with handicaps could extend services downward to birth for eligible children. Final

plans for such comprehensive early intervention systems were to have been approved by 1991. While all 50 states have indicated an intent to participate in these revisions of the Education for All Handicapped Children Act, the comprehensive systems of service for the most part still await full implementation. The two unique features of PL 99-457 were (a) it required an interagency effort to develop a comprehensive system of service, which built upon and strengthened whatever services were already available for infants and young children; and (b) it specifically defined the relationship between parents and professionals as one of partnership.

Interagency Collaboration: Impediments to Progress Beyond Naming Problems

Will a comprehensive early intervention service system evolve now that there is a national legislative mandate and similar mandates within state laws? Both the wisdom and necessity of mandating a comprehensive system should be clear from reviewing how biological adversity and environmental adversity have become increasingly confounded. Identifying infants for early intervention services will require at least collaboration among health providers and educators. Conditions such as low birthweight, prematurity, and Down Syndrome are biological anomalies that initially are presented to medical practitioners. However, the medical practitioners role in the first two conditions is primarily to save the life of the infant and return the child to biological health. A major role of the medical practitioner in the second case is to determine other medical anomalies such as cardiac anomalies and hearing impairments, which frequently are associated with Down Syndrome. In both cases, referral to some type of support service for families and developmental intervention for the infants should occur but often does not (Goodman & Cecil, 1987). For the infants discharged from neonatal intensive care nurseries (NICU), developmental follow-up is recommended by the American Academy of Pediatrics, but is less likely to be successfully accomplished with families from the inner city (Brinker, Frazier, Lancelot, & Norman, 1989). In one study the routine scheduling of follow-up visits for developmental assessment included five previsit reminders and an offer of $20 to be collected at the time of the visit (Lasky et al. 1987). Even with that effort (considerably more than the typical developmental follow-up program), 43% of the families living in poverty were lost.

Identification of infants with disabilities will not occur if (a) physicians believe there is no effective treatment available; (b) families who are referred do not utilize the services to which they are refered; or (c) there are no services to which children can be refered when a condition is identified (Ferry, 1981; Brinker, Frazier, & Baxter, 1992). In a review of the characteristics of

children on waiting lists or program rosters in 16 early intervention programs in Chicago, we found that only about 10% of the children on waiting lists ever moved into the program for which they were waiting or into any other program. Since the 16 programs constituted the available early intervention options in these community areas, it is unlikely that these children ever received early intervention prior to their third birthday.

PL 99-457 from its inception regarded early intervention as an interagency, interdisciplinary effort. The nurses from the neonatal intensive care unit, visiting nurses, family therapists, child psychologists, pediatricians, physical therapists, occupational therapists, speech pathologists, and special educators were all regarded as essential collaborators within the structure of a comprehensive early intervention system. The law requires that an interagency council be appointed in each state and that the governors appoint a lead agency to administer the early intervention system. However, the system was intended to bolster rather than supplant the efforts of existing professionals and agencies involved in early intervention. The law also required that each interagency council include parents of infants and young children with handicaps.

My remarks about the development of policy through interagency efforts are based upon my own experience as a member of an ad hoc statewide committee to draft a state plan for early intervention in Illinois (from 1986 to 1988), participation as a member of the governor's advisory committee for the reduction of infant mortality (from 1988 to 1993), and as chair of the Chicago Consortium of Early Intervention Service Providers (from 1985 to 1993). I had previously been involved on similar advisory committees to plan statewide early intervention systems in Nebraska (1978-1979) and in New Jersey (1981-1983).

Two features of interagency planning processes undermine the creation of a shared vision. One problem is that the agency participants change somewhat capriciously, or participate sporadically so that across time there is little continuity of dialogue and no process for the creation of functional concepts charged with the affect and hard work through which they were created. Second, there is general silence about the most strongly held self-interests of the individuals and agencies participating in the process. Hence resources are never truly put on the table to be shared as a part of a new whole. The result is that the efforts of the interagency participants are not really designed to create something new, they are designed to protect something old. As Boyd and Crowson (1992) recently noted:

> Institutions are complex political systems with strange tendencies to contain rewards at cross purposes, to reward behaviors that fail to fit organizational objectives, and to hide powerful disincentives in the very structures that are thought to be rewarding. (p. 4)

I will illustrate the problem of defining the stakes in interagency collaborations with two examples. First, consider the problem of identifying infants and young children who are at risk for developmental disabilities. Because the health care system is so decentralized there is no single repository of information about infants with disabilities or infants experiencing biological or environmental events that place them at high risk for disabilities. However, since most infants are born in hospitals,there is an opportunity to coordinate information about children with various risks in the perinatal and neonatal periods. Illinois, like many states, developed an information gathering system that would create a registry of infants who had the highest biological risks. Consultation and collaboration by many professionals occurred over a several year period. The descriptions of what conditions should be included in the registry, what kind of information management hardware and software should be used, how perinatal center staff would be trained to provide the information, were the focus of many hours of effort by various working groups and outside consultants. Finally, the Adverse Pregnancy Outcomes Registry System (APORS) was unveiled and hospital administrators were trained to enter information regarding the risks to infants born in their settings.

However, a vision of the purpose and day-to-day use of the system was taken for granted in this development process. Questions about how the system would be used to facilitate referrals to early intervention programs and to plan for program expansions or reductions were never fully addressed. When these concerns were raised they were deemed as important, but required thorough review by legal counsel because of the issue of confidentiality. To this date the APORS remains a repository of information to which no one seems to have access. It has not been included in discussions by the interagency council as a tool for estimating the need for early intervention. It has not led to referrals of infants to appropriate intervention services. It has not been used as a tool for tracking the services that infants have received. It has not been a tool for conducting research on the developmental outcomes of risks. It stands as a piece of the jigsaw that had no picture (Brinker, 1991). Nevertheless, the Illinois Interagency Council for Early Intervention has been making a picture of comprehensive early intervention services without considering APORS as a piece for their puzzle. The oversight is a tacit acknowledgement of the political and territorial nature of institutions alluded to by Boyd & Crowson (1992).

The second example of the problem of interagency collaboration concerns the effort to improve the life chance of infants born in poverty in Illinois. In 1986, the State of Illinois Department of Public Health (IDPH) launched the "Nine by Ninety" initiative to reduce infant mortality to 9 deaths in 1,000 live births by the year 1990. To do this, IDPH identified 29 local communities across the state in which infant mortality was exceptionally high (ranging from 20 to 33 infant deaths per 1,000 live births). To give some perspective

to these infant mortality figures, the infant mortality rate in Japan is 4, in Canada is 7, and in Haiti is 35 per 1,000 live births, respectively. Illinois ranks among the 10 worst states in terms of infant mortality (12 in 1986, dropping to just above 10 in 1990). In general the infant mortality rates for African Americans is at least twice the rate of the general infant mortality figures. The "Nine by Ninety" initiative was changed in name to the "Families with a Future Program" (FWF) within the first year of effort. The overall goal was to create within the worst infant mortality areas, networks of community organizations that employed paraprofessionals within the community to identify every pregnant woman and ensure that she obtained appropriate prenatal care. Interestingly, none of the networks included schools, in spite of the fact that mothers of enrolled students have a relatively high probability of subsequent pregnancy. Although infant mortality in Chicago increased overall from 1988 to 1989, it decreased slightly in the targeted community areas. For those mothers who were identified and received adequate prenatal care, the infant mortality rates were considerably reduced to 7.7 in 1,000 live births.

However, rather than hailing the success of FWF the focus has shifted from mortality to the fact that most of the pregnant women in the targeted areas were not identified and served. Believing that you should go to a reputable facility for prenatal care does not come easily if you've experienced a lifetime of medical care visits that consume the better part of a day, or if you've only utilized emergency room care. The successes of FWF were achieved through engaging women to utilize prenatal health services. Such engagement occurred because of the persistent interest and encouragement from the community workers. Such personal effort culminated in a relationship strong enough to overcome negative expectations about health care.

Nevertheless, the vision of the FWF has now shifted from the development of relationships culminating in prenatal care and full-term pregnancies, to a new effort to provide managed health care to every Medicaid-eligible woman and child in the state. The responsibility for articulating this vision has shifted from the Department of Public Health to the Department of Public Aid. As one public aid administrator told a meeting of the executive directors of the contracting agencies that employed community workers within the FWF, "This train is leaving. Managed care is the wave of the future. Get on board or be left behind." The other message from that meeting was that the FWF networks would complete their current contracts at the end of 1992 and would be free to compete for new contracts from a managed care "megacontractor" in 1993. The megacontractor is located in Virginia. Access to care has now been defined in terms of identifying physicians to provide care for each woman, and setting up a billing arrangement to ensure reimbursement, hence maintaining the physicians' involvement. However, the managed care system assumes that women will access this care simply because it is available. This

systemic approach may fail because the targeted women are not active consumers and will not become active consumers until they are convinced that they will benefit from the services provided. FWF has demonstrated that such belief, for example, in the importance of prenatal care (a belief that is taken for granted in the general society) is acquired only through a personal trust in others. As infrastructures are replaced individuals are replaced. Trust may not be so easily replaced and without trust needed services may not be accessed.

Stakeholders in the Development of a Comprehensive System of Early Intervention

Change, considered at many levels of analysis from the behavior of individuals to the behavior of school systems, is increasingly being analyzed from the perspective of dynamic systems analysis (Gunnar & Thelen, 1989; Miller, 1978; Plas, 1986; Sameroff, 1983; Senge, 1990). However, merely analyzing problems in system terms will not necessarily lead to the development of solutions that lead to positive change. Rather, such analysis may merely obscure the vested interests of various institutions representing different components of a system that is desired (Boyd & Crowson, 1992). This identification of components and their responsibilities seems to be a stage that the interagency planning process has not progressed beyond. Representatives of the agencies have met repeatedly over the last 4 years. However, the stakes in terms of interests, goals, and resources controlled by participants in the planning process have not been articulated as part of the process. System planning requires negotiation of functional rules that define the roles and incentives for participants from different establishments to participate in the new system. Boyd and Crowson (1992) describe such rules as the "deep structure" of institutions, suggesting that interagency efforts will not achieve systemic change if system components are articulated only at the surface structure.

The integration of health and educational services poses particular problems of economic scale. Those professionals associated with the medical establishment have a major stake in maintaining the value of their services at an economic scale that is typically higher than services within the educational establishment. The economy of medical services is based upon an itemization for the time spent by each professional relative to individual clients. The economy of educational services distributes professional resources across pools of clients in a programmatic fashion rather than through tracking fees to individual client contacts. The stakes of professionals within the educational economy is the need to maintain the quality of service by ensuring that the pool of clients does not become too large for an individual service provider. There are also differences in role definition such as the teacher's focus on the needs

of the whole child versus the therapist's focus on narrowly defined areas such as gross motor or language development. These interests are often strongly held and implicit in the characterization of the components of a comprehensive service system. Explicitly addressing these concerns has generally not occurred in the negotiation of comprehensive services. Nevertheless, current national concern over the unbridled growth of the medical economy may create a context in which deep structure issues are made explicit.

Senge (1990) introduces a systems perspective on the development of what he calls "learning organizations." Learning organizations are driven by a shared vision that transcends components of the system. Achieving a shared vision requires the negotiation of core concepts within which individual professionals not only can articulate their goals but also can attain personal mastery in pursuing their goals. The characterization of the need for different types of organizational climates in businesses is somewhat clearer in Senge's account than the process by which visions come to be shared across an organization. Nevertheless, his challenge to the business community is certainly relevant to current efforts to achieve comprehensive services within schools.

> There is a certain irony to mankind's present situation, viewed from an evolutionary perspective. The human being is exquisitely adapted to recognize and respond to threats to survival that come in the form of sudden dramatic events. . . . Yet today the primary threats to our collective survival are slow, gradual developments arising from processes that are complex both in detail and dynamics. . . . Building learning organizations involves developing people who learn to see as systems thinkers see, who develop their own personal mastery, and who learn how to surface and restructure mental models, collaboratively. (Senge, 1990, p. 367)

Parents as Stakeholders

The Education for All Handicapped Children Act (PL 94-142) outlined a broad set of procedural mechanisms by which parents could insure that they had a voice in the educational plan for their child with disabilities. These included description of a quasi-legal system for appealing parental disagreements regarding (a) the evaluation of their child's needs, (b) the restrictions on their child's opportunity for interaction with children without handicaps, (c) the specific educational objectives and techniques to achieve these objectives, and (d) the evaluative processes through which exit from the special education system was justified. While PL 94-142 opened the educational process to parent scrutiny to an extent unparalleled within the educational establishment, PL 99-457, the 1986 revision, went even further by including parents as partners in the educational process. Instead of an individualized

educational plan (IEP), an individualized family service plan (IFSP) provides the structure for articulating professional and family roles in the intervention process. Such close collaboration within a family-centered partnership has considerable merit. A major component of the developmental agenda of infants and very young children is to form a secure attachment relationship with their primary caretakers that provides the basis for learning and serves as a prototype for all subsequent human relationships.

Just as the conceptual design of a comprehensive early intervention system is considerably easier than its practical implementation, so too the articulation of the importance of a partnership between parents and professionals is considerably easier than achieving such partnerships. I have discussed the practical and conceptual problems of achieving family-centered, early intervention in more detail elsewhere (Brinker et al., 1992; Brinker, 1992a; Schutter & Brinker, 1992). Suffice it to say that much complexity lurks in the diversity of meaning for the term "family." The normative assumptions of service providers regarding their meaning for family may seriously undermine the achievement of relationships in which parents are empowered. A particularly difficult area is in attempts to empower parents from chronically disadvantaged backgrounds to more effectively impact upon the development of their infant with disabilities.

The concept of a family-centered partnership presumes two features, which cannot be taken for granted among chronically disadvantaged families. First, it assumes that there is a shared definition of need, in this case a need for intervention services to prevent or ameliorate developmental disabilities in the infant. Second, it assumes that the family has a consumer orientation within which they are able to express their concerns in the belief that the service providers will attempt to tailor services around their needs. A corollary of the consumer identity within a free market is that if the services are not those that are desired by the consumer then alternative service providers can be sought, who the consumer believes will better meet their needs. Are these valid presumptions if, for example, a mother feels guilty that she may have caused her child's disability and she desperately wants development to appear normal? If she believes her child to have no problems then she will not have to face the weekly professional observations that descend upon her like judgments. Can we pretend that a mother referred to early intervention by the court because her child's cerebral palsy was induced by cocaine exposure is in fact freely entering a partnership with professionals?

Society has participated in the creation of an underclass that in fact cannot effectively articulate their stakes in their children's development. The psychological despair among the poor exists because of lifetimes of experience of inadequate health care, inadequate housing, inadequate education, and inadequate personal safety (Garbarino, 1990; Garbarino, Kostelny, & Dubrow, 1991; Pinkney, 1992) The inequalities are truly savage for those who look

honestly at them (Kozol, 1991). One has to believe in a solution to seek it. Of course it would be to society's benefit to ensure a belief in the importance of prenatal care and education given their costs, when compared to the $1,500 per day it costs for neonatal intensive care unit services to low birthweight newborns.

When survival is jeopardized by violence in the streets, by dependency on drugs by other family members, and by inadequate food and shelter, then delays in a child's development may go unnoticed. Service providers who have long lists of children waiting for their services typically do not have a stake in devoting their limited resources to families who do not seem to want them. However, it is truly in the best interests of society that families in desperate circumstances are assisted to discover their stake in pursuing a partnership with professionals on behalf of their child. For chronically disadvantaged families to become stakeholders, it will require all components of a comprehensive early intervention system to include in their efforts unusual measures to share their vision of early intervention. Our efforts to engage disenfranchised families have required considerable ingenuity to assist families to address survival needs and to persist with them to obtain resources from a public service sector that seems as disempowered as the families served (Brinker et al., 1992). While tangible incentives (shelter, food, clothing, diapers) may be necessary to establish ongoing interaction within which relationships can develop, the creation of a network of relationship options may be the best way to empower families, specifically with respect to their infants' needs.

The most important relationships within that network are the relationships among families who share some similar problems. It is important to stress that the development of trusting relationships is not necessarily facilitated by a context that is homogeneous in terms of family experiences and needs. In fact it seems that the more diverse the parent support groups the better the participation by chronically disadvantaged families. For example, mothers whose infants' disabilities were related to inutero drug exposure attended parent support groups more regularly when the group included non-drug-using mothers; grandmothers and fathers; and diversity of race. Groups that included only drug-using mothers of the same race were very poorly attended. Finally, we found that attendance improved when another primary caregiver in the support group contacted a family after an absence in comparison to attendance after an early intervention staff called or visited a family following an absence. While the process of helping parents become stakeholders in early intervention is very person intensive, it is a serious and costly mistake to consider a disadvantaged family's lack of involvement in early intervention as an informed choice.

Conclusion

I began this paper with consideration of the growing societal awareness of the inter-relatedness of many current domestic problems facing the United States. My hope is that this is an important contextual change within which a dynamic systems approach can be used to address the well-being of children and families. However, simply assembling the diverse agencies in a system and requiring them to address a list of objectives will not culminate in a comprehensive service system for children. Even in the context of a legislative mandate for a comprehensive early intervention system based upon interagency cooperation and parent partnership, there are strong organizational and personal habits that interfere with the development of a shared vision. The vision which Nicholas Hobbs articulated 20 years ago for schools as the comprehensive agency for children has had very little influence on public policy for children. Nevertheless, the sense of crisis over the future of children in the United States continues across the political spectrum (National Commission on Children, 1991). The stakes of families in the emergence of a shared vision about the well-being of children are significant but poorly articulated. To the extent that the middle class responds with private selection in a free market of competing health and education services, I believe we as a society will have missed the opportunities in the present moment (Brinker, 1992b). In a posthumously published volume Hobbs concludes:

> The schools thus emerge as the most appropriate of the regular socializing agencies to take on the developmental and educational functions central to well-designed and family-strengthening programs of child care and parent education. Our values in particular argue strongly for the community-enhancing functions of services offered by the public education system and the potential of such programs, if well supported and responsive to parent needs, to enhance parent abilities and the development of all family members. (Hobbs, Dockecki, Hoover-Dempsy, Moroney, Shayne, & Weeks, 1984, p. 302)

The experience of articulating a comprehensive early intervention system suggests that we may often look back to planned futures wondering why our system, which has so many components and costs so much, accomplishes so little. I believe we can prevent a future full of such painful nostalgia over our planning days only if the deep structures of our institutions, roles, and incentives are brought to the surface. Then the hard negotiation for a functional system can begin. Schools and the families and communities they serve can and should be central to such negotiation.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Avery, G. (1985). Effects of social, cultural, and economic factors on brain development. In J. M. Freeman (Ed.), *Prenatal and perinatal factors associated with brain disorders* (pp. 163-176). Bethesda, MD: National Institutes of Health (Publication No. 85-1149).

Baumeister, A. A., Kupstas, F., & Klindworth, L. M. (1990). New morbidity: Implications for prevention of children's disabilities. *Exceptionality, 1* (1), 1-16. EJ 408621

Boyd, W. L., & Crowson, R. L.(1992, October). *Integration of services for children: A political economy of institutions perspective*. Paper presented at the Conference on School/Community Connections: Exploring Issues for Research and Practice, Washington, DC.

Brinker, R. P. (1991). The process of moving from a registry of high risk conditions to referral and participation in early intervention programs. In *Making change happen: From debate to action* (pp. 43-52). The proceedings of the Fifth Annual Maternal and Child Health Leadership Conference, U.S. Department of Health and Human Services, Regions V and VII. Chicago: University of Illinois School of Public Health.

Brinker, R. P. (1992a). Family involvement in early intervention: Accepting the unchangeable, changing the changeable and knowing the difference. *Topics in Early Childhood Special Education, 12*(3), 307-332. EJ 455738

Brinker, R. P. (1992b). Review of S. J. Meisels & J. P. Shonkoff (Eds.) Handbook of early intervention . *Topics in Early Childhood Special Education, 12*(3), 428-434.

Brinker, R. P., Frazier, W., & Baxter, A. (1992, Winter). Maintaining involvement of inner city families in early intervention through a program of incentives: Looking beyond family systems to societal systems. *OSERS News in Print , 4*(3), 8-17.

Consortium for Longitudinal Studies. (1983). *As the twig is bent: Lasting effects of preschool programs.* Hillsdale, NJ: Lawrence Erlbaum. ED 253299

Garbarino, J. (1990). The human ecology of early risk. In S. J. Meisels & J. P. Shonkoff (Eds.), *Handbook of early intervention: Theory, practice, and analysis* (pp. 78-96). New York: Cambridge University Press.

Garbarino, J., Kostelny, K., & Dubrow, N. (1991). *No place to be a child: Growing up in a war zone*. Lexington, MA: Lexington Books.

Gilkerson, L., Gorski, P., & Panitz, P. (1990). Hospital-based intervention for preterm infants and their families. In S. J. Meisels & J. P. Shonkoff (Eds.), *Handbook of early intervention: Theory, practice, and analysis* (pp. 445-468). New York: Cambridge University Press.

Goodman, J. F., & Cecil, H. S. (1987). Referal practices and attitudes of pediatricians toward young mentally retarded children. *Developmental and Behavioral Pediatrics, 8*, 97-105.

Gunnar, M. R., & Thelen, E. (1989). *Systems and development: The Minnesota Symposia on Child Psychology*, Volume 22. Hillsdale, NJ: Lawrence Erlbaum.

Guralnick, M. J., & Bricker, D. D. (1987). The effectiveness of early intervention for children with cognitive and general developmental delays. In M. J. Guralnick & F. C. Bennett (Eds.), The *effectiveness of early intervention for at-risk and handicapped children* (pp. 115-173). New York: Academic Press.

Hobbs, N. (1975a). *Issues in the classification of children: Volume 1*. San Francisco: Jossey-Bass.

Hobbs, N. (1975b). *Issues in the classification of children: Volume 2*. San Francisco: Jossey-Bass.

Hobbs, N. (1975c) . *The futures of children*. San Francisco: Jossey-Bass.

Hobbs, N., Hoover-Dempsy, K., Moroney, R. M., Shayne, M. W. , & Weeks, K. H. (1984). *Strengthening families*. San Francisco: Jossey-Bass.

Kotlowitz, A. (1991). *There are no children here: The story of two boys growing up in the other America*. New York: Doubleday.

Kozol, J. (1991). *Savage inequalities: Children in America's schools*. New York: Crown Publishers. ED 356035

Meisels, S. J., & Wasik, B. A. (1990). Who should be served? Identifying children in need of early intervention. In S. J. Meisels & J. P. Shonkoff (Eds.), *Handbook of early intervention: Theory, practice, and analysis* (pp. 605-632). New York: Cambridge University Press.

Miller, J. G. (1978). *Living systems*. New York: McGraw Hill.

National Commission on Children. (1991). *Beyond rhetoric: A new American agenda for children and families*. Washington, DC: Author. ED 336201

National Commission on Excellence in Education. (1983). *A nation at risk: The imperative for educational reform*. Washington, DC: Author. ED 226006

Palfrey, J. S., Singer, Walker & Butler. (1987, November). Early identification of children's special needs: A study in five metropolitan communities. *Journal of Pediatrics, III*(5), 651-59. EJ 422177

Pinkney, D. (1992, October 29). The emergency and trauma care: Patient dumping ruling against U. of C. leaves U.S. hospitals in shock. *Chicago Sun Times*, pp. 1, 3.

Plas, J. M. (1986). *Systems psychology in the schools*. New York: Pergammon.

Robinson, J. L., & Choper, W. B. (1979). Another perspective on program evaluation: The parents speak. In E. Zigler & J. Valentine (Eds.), *Project Head Start: A legacy of the War on Poverty* (pp. 467-476). New York: The Free Press. ED 183266

Sameroff, A. J. (1983). Developmental systems: contexts and evolution. In W. Kessen (Vol. Ed.), *History, theories and methods: Vol. 1* (pp. 237-294) of P.H. Mussen (Ed), *Handbook of Child Psychology* (4th ed.). New York: Wiley.

Schorr, L. B. (1988). *Within our reach: Breaking the cycle of disadvantage*. New York: Doubleday. See ED 354089

Senge, P. M. (1990). *The fifth discipline: The art and practice of the learning organization*. New York: Doubleday.

Schutter, L., & Brinker, R. P. (1992). Conjuring a new category of disability from prenatal cocaine exposure: Are the infants unique biological or caretaking casualties? *Topics in Early Childhood Special Education, 11*(4), 84-111. EJ 441307

Testa, M., & Lawlor, E. (1985). *The state of the child*. Chicago: Chapin Hall Center for Children, University of Chicago.

Testa, M., & Wulczyn, F. (1980). *The state of the child*. Chicago: The Children's Policy Research Project, University of Chicago.

Upshur, C. C. (1990). Early intervention as preventive intervention. In S. J. Meisels & J. P. Shonkoff (Eds.), *Handbook of early intervention: Theory, practice, and analysis* (pp. 633-650). New York: Cambridge University Press.

Zigler, E. (1967). *Familial mental retardation: A continuing dilemma. Science, 155*, 292-298.

Zigler, E. (1979). Project Head Start: Success or failure. In E. Zigler & J. Valentine (Eds.), *Project Head Start: A legacy of the War on Poverty*. New York: The Free Press. See ED 183266

VIII

Educators Respond to New Jersey's "One-Stop Shopping" Program

Roberta B. Knowlton
Edward H. Tetelman

American teenagers must cope with an increasingly stress-generating society—personal and family crises, financial stresses and welfare dependency, high teenage unemployment rates, peer pressures, and health-care problems. These problems have been well documented, as in the *Kids Count* report (Center for the Study of Social Policy, 1991) sponsored by the Annie Casey Foundation.

How American Children Are Doing

Kids Count Benchmark	National Trends Over the 1980s	State Trends
Percent low birth weight babies	3% worse	35 states worse*
Infant mortality rate (per 1,000 live births)	22% better	51 states better*
Child death rate, ages 1-14 (per 100,000 children)	18% better	48 states better*
Teen violent death rate, ages 15-19 (per 100,000 teens)	11% worse	34 states worse*
Percent all births that are to single teens	14% worse	42 states worse*
Juvenile custody rate, ages 10-15 (per 100,000 youths)	10% worse	32 states worse*
Percent graduating high school	No change	28 states better
Percent children in poverty	22% worse	40 states worse
Percent children in single-parent families	13% worse	44 states worse

* Including the District of Columbia

Note. From *Kids Count Data Book: State Profiles of Child Well-Being*, by Center for the Study of Social Policy, 1991, Washington, DC: Author

These figures provide a statistical glimpse of social problems that become individual problems in the schools of America. Thousands of young people face family disarray, community violence, poverty, and personal health issues as they struggle, at the same time, with the normal developmental challenges of childhood and adolescence. Too often, combined difficulties destroy the capacity to learn, to address schoolwork, or to behave appropriately in an educational or community setting.

It has been difficult for adults to come to terms with the extent of these problems. As one educator put it, "I believe I'd be rich if I had a nickel for every adult who's said 'I wouldn't want to be a teenager these days,' but then left it at that."

A major attempt to address these situations began in New Jersey in 1988 when the state created the School Based Youth Services Program (SBYSP) to provide comprehensive services on a "one-stop shopping" basis at or near schools to children, youth, and families. The program links education, health, employment, and human service systems, and aims to provide young people, especially those at high risk, with the opportunity to complete their education, obtain skills that will lead to employment or additional education, and to lead mentally and physically healthy and drug-free lives.

The School Based Youth Services Program

The Program Design

The School Based Youth Services Program is designed to bring the services of the state Departments of Human Services, Health, and Labor, as well as community programs, to schools so that young people and their families can have access to them. SBYSP does this in a manner that unites these services with local initiatives and existing community resources.

The design provides state funding for each local program through the New Jersey Department of Human Services, using a proposal and grant funding process. Grants were offered to communities that showed the support and participation of a broad coalition of local community groups, teachers and parents, businesses, public agencies, nonprofit organizations, students, and local school districts. Applications had to be jointly filed by a school district and one or more local nonprofit or public agencies. The applicants also designated a managing agency for the program, which could be a nonprofit agency or school.

At the time of this writing, 36 schools in New Jersey have School Based Youth Services Programs. Twenty-nine of these serve 13-19-year olds through sites at public secondary schools, and seven are located in elementary and middle schools. The programs serve young people out of school as well as those who attend.

The managing agencies range from the school districts themselves to community agencies and organizations such as hospitals, mental health providers, nonprofit employment agencies, nonprofit human service providers, and community organizations such as the Urban League. Each managing agency is contracted by the New Jersey Department of Human Services to deliver, in conjunction with an on-going community advisory board, the following core services at each site:

- individual and family counseling;
- primary and preventive health services;
- drug and alcohol abuse counseling;
- crisis intervention;
- employment counseling, training, and placement; and
- summer and part-time job development.

In addition, all sites provide recreation and referrals to health and social services.

Sites were permitted to offer more than the core services, depending upon the community's particular needs. Special projects related to anger management, mentoring, tutoring, special vocational programs, teen parenting classes, day care, transportation, hotlines, and programs to help teens deal with appropriate ways to move into adulthood, including their sexuality and the prevalence of alcohol and drugs, are commonly provided at local sites.

Managing agencies hire a director for the program and assist the director in hiring staff and/or subcontracting with local service-providing agencies, and linking to collaborative efforts with youth-serving agencies throughout the area. Most of the 36 programs work with an average number of 12 community organizations or agencies.

From its inception, the design encouraged recreation services at all sites. These services assure that the programs are nonstigmatizing to those using the confidential counseling services by providing recreational reasons for program participation, as well as modeling safe and healthy ways to use nonschool hours. It is a key element in making programs successful with children, youth, and families.

The School Based Youth Services Program has been well received. Educators and social service providers often say that they believe the program is on the cutting edge in addressing the needs of youth in our changing society. It is demonstrating that when schools and communities provide services in a convenient, sensitive, and holistic manner, children, youth, and families will use them. Department of Human Services' data found that over 19,000 youngsters participated in the program in 1991, and that one out of every three eligible teenagers used SBYSP in a single school year. Over half of those using the services were considered to be potential dropouts or at risk of serious

problems. Data for 1991 also shows that boys and girls use the program at an equal rate: Blacks, Whites, and Hispanics utilize the programs in that order; with 9th and 10th graders using the programs the most. Setting aside all of the recreational services, mental health and family counseling are the most utilized services, followed by health and employment services.

The program has been nationally recognized. It was awarded the American Public Welfare Association Successful Projects Initiative Award in 1990. In 1991 it received the prestigious Ford Foundation/Harvard University Kennedy School of Government Innovations Award, and was highlighted in Bill Moyers' "All Our Children" television series and in such foundation and government reports as the Carnegie Corporation's *Turning Points* (1989).

Although the program has not yet conducted a full-scale independent evaluation, some limited outcome data is available from individual sites. At Pinelands Regional High School, for example, a program located in one of New Jersey's most rural and isolated areas, the dropout, suspension, and pregnancy rates have significantly dropped, and the Division of Youth & Family Services has noted a decided drop in cases of child abuse.

	1988-1989	1989-1990	1990-1991
Dropouts	—	73	24 (10GED)
Suspensions	—	322	78
Pregnancy	20	13	1

Additionally, the urban Hackensack High School program reported that student fighting decreased dramatically, from 148 in 1988 to 72 in 1990. This was accomplished through the establishment of an anger control and dispute resolution program created by the SBYSP in concert with the school administration.

Originally, there were questions as to whether school personnel would welcome the social service personnel and SBYSP activities. So, in 1991, the Department of Human Services surveyed school personnel regarding the SBYSP in their school:

- Over 90% found the program to have a positive effect on students and the school's environment;
- Over 85% reported that the program allowed them to be more effective in their own jobs; and
- Over 90% reported that the program allowed them to assist more students.

Despite academic fears about turf and other barriers, school personnel have almost always been receptive to the SBYSPs. The department made it clear at the outset that the School Based Youth Services Program would not duplicate

any services the school already provided or was willing to provide, but would accommodate itself to the needs that schools could not meet. There was initial fear that SBYSP staff would replace school personnel. This requirement assured that did not occur. In fact, the educators found that the School Based Youth Services Program allowed them to help children and families in areas where they did not have the time or skills. For example, when the guidance counselor has handled the academic needs of a young person but sees that intensive family counseling or home visitation might be important in a particular case, they refer the person to the School Based Youth Services Program.

The department ensured that school personnel worked on establishing the SBYSP. Moreover, in the on-going work the SBYSP staff personnel are continually encouraged to explain the program to educators in whatever formats are appropriate. To keep communication as open as possible, the staff also consistently report to the schools as to the attendance of students at SBYSP functions, and sometimes obtain confidentiality releases from students so as to include appropriate school staff and persons in counseling matters.

Factors Contributing to the Success of the School Based Youth Services Program

Several factors contribute to the success of the SBYSP, but none are more important than the fact that the SBYSP brings integrated resources to interrelated problems. When children and their families bounce like pinballs from problem to problem and from one agency to the next, and when we "legislate by symptom," as one educator puts it, we ignore the fact that the young person experiencing one problem is likely to experience several difficulties simultaneously. We end up with some families served by as many as 40 agencies and others falling completely between the cracks and regulations. Two examples will suffice to illustrate both the need for one-stop services and the success this approach can provide.

A student at one SBYSP confided to project staff that her friend was about to run away. When the counselor approached the friend, problems emerged related to a rape and a home in disarray, with neglect, abuse, and immigration difficulties. The young woman, overwhelmed with feelings of helplessness, hopelessness, and confusion, was about to run away. The SBYSP was able to integrate the efforts of a family counselor, the local health agency, municipal authorities, and school personnel. The family stabilized itself, the sexual abuse issue was addressed, the young woman stayed in school, graduated, and is now attending a university.

Another student from an inner-city school had poor academic performance, was in trouble with the law, and was selling drugs to supplement his family's

income. After a fist fight, he was told he was going to be expelled from school. Friends told him to go see the folks at the School Based Youth Services Program. Reluctantly, he went over and found there were people who really cared about him. Over the next several weeks, he received counseling from SBYSP personnel with various professional backgrounds and met others like himself, as well as teens who were doing well in school. With time he realized that the path he was on was leading him to jail and he decided to apply his energies elsewhere. He graduated, went into the National Guard, returned, and now volunteers at the School Based Youth Services Program helping other young adults to avoid his mistakes. He credits his success to the existence of the program.

The ability to bring resources to bear in a coherent fashion does not occur haphazardly. There are important structural elements and activities that make this program a success. They are described in the following section.

Program Structure

The SBYSP was conceived as a permanent program. The SBYSP is not a time-limited demonstration program that will later be funded by local boards of education or some other source, pending its success. It was created with a permanent funding base from the start. It also is able to expand by pulling in other funds from existing programs such as Medicaid and small grants. This is critically important to schools and educators who have seen too many fine initiatives come and go from their institutions, leaving a wake of unhappy families, educators, and children when the funding disappears. The 36 schools involved have been able to integrate the SBYSP into the school environment because they knew it would be a permanent addition to their programs.

SBYSP services are offered to all students and in a nonstigmatized setting. Each SBYSP has a recreational program and some space for just hanging out. Because schools vary, these talking or playing spaces are unique to each school and locale, but in every case, the recreational setting makes it clear that the SBYSP is a program for all students, not just those with problems. The program sees youth who are court involved as well as the best students and athletes in the school. The settings allow students to get to know and trust staff on an informal basis to build a base for confiding fears and problems. An example is provided by a high school nurse:

> I remember especially when our ninth graders saved the life of one of our students. They took a student's suicide note and went to the social worker at SBYSP. They were all counseled, and the disturbed student was also counseled and hospitalized. These memories aren't too sweet, but I'm so proud of the kids. They had used what they learned at SBYSP—that friends help friends and that there are some secrets you must not keep.

A broad base of support was secured before the program was activated. The program was endorsed at all levels and had gubernatorial support from the outset. Republican Governor Thomas Kean initiated the program, and his successor, Democratic Governor Jim Florio, expanded it, demonstrating that effective programs can cross political lines and administrations. It also has bipartisan support in the legislature. Funding for the program was made as secure as possible by establishing a line item in the state budget with the clear intention that it be reappropriated annually. The SBYSP was placed in the Office of the Commissioner of the Department of Human Services, which gave the program visibility and the ability to cut across intra- and interdepartmental lines.

It is also important to note that when the program was first organized, the Department of Human Services met with and conducted focus groups with statewide organizations, ranging from departments of state government, the teacher's unions, the New Jersey School Boards Association, the Parent Teacher Organization, child-advocacy and community organizations, to private business and industry councils. Input was requested and utilized as the program design was finalized. The result was on-going support from those organizations.

The programs are community based and locally designed. It was known that many statewide initiatives have failed because they neither shared the power and responsibility for programs with local organizations nor were sensitive to the myriad of differences between one community and another. To avoid such problems, applicants for the New Jersey School Based Youth Services Program were required to document a united community approach. Representatives of community organizations, social agencies, school personnel, and parent groups selected the managing agency for the local program. As noted earlier, the managing agency could be any responsible, experienced, public or nonprofit community-based organization. Its job is to receive and disburse the funds provided by the Department of Human Services in a manner that provides the required core services and additional optional services in ways that meet the particular needs of the local community. For example, all programs offer direct health services. Some do this by subcontracting with a nearby hospital or federally supported health center, while others use the funding to employ a full-time nurse practitioner as a part of the SBYSP staff.

Parent, Student, and Community Involvement

Parents are a particularly important part of the community. Students utilizing SBYSP services must have parental permission to be included in the program. Permission forms list the services available so that parents can chose to give or withhold permission to use particular services. The forms are sent to parents in a routine fashion at the beginning of the school year and are returned by almost all families.

Parent representatives are also a part of each advisory board and as such are involved in every stage of program development. Many local sites have created special parent advisory committees, mentoring programs, and parent development seminars.

Young people were included in the planning process. During the concept phase of the program, young people were asked to contribute to the development of the programs. The Department of Human Services went to schools and spoke with young people and found a clear consensus point. The students wanted "caring adults who would be non-judgmental, help them with decision making, and provide a safe haven" where they would not be labeled or stigmatized. At the local level, applicants for the program also obtained input from young people in the process of creating their proposals. Today, most SBYSPs have a youth advisory group to give direction to program activities. All programs adjust their services on the basis of sensitivity to youth concerns and suggestions. Students often rename their SBYSPs to suit their preferences. Teen Power House, The Imani Center, or the Drop-In Center can sound more inviting than the School Based Youth Services Program.

The school-community dimension is continually addressed. To provide the information students need today, educators must utilize every hour to its fullest extent but children who are hungry, grieving, or frightened cannot make use of all that educators have to offer. It is the community that has the capacity to provide interventions that can make learning possible. What, then, is required to make an effective collaboration possible between schools and their communities?

In creating the collaboration, schools usually provide space, support, and staff assistance. Communities supply social workers, youth workers, health practitioners, employment and job development counselors. Even this, however, is negotiated. Sometimes space must be adjusted, such as converting cafeterias and sewing rooms to recreation areas after school, or attaching municipal recreation programs to schools to create an after-school program on site, or subcontracting with teachers to provide after-school tutorial or recreational services.

Communications, meetings, shared training, in-service programs, and time to socialize are all provided through SBYSPs. School personnel appreciate learning more about community resources. They also appreciate advice and support from SBYSP staff when they face children in distressed circumstances. Community personnel are pleased when they are able to reach youth in schools so as to prevent problems that may develop, or will worsen, if not addressed at an early stage.

Coordinated leadership is often necessary, and a SBYSP that provides a forum for discussion helps to show that the community is usually more willing to help than schools suppose and schools are more often interested in the community than the communities suppose.

School Administration

Support from the school administration and faculty is critically important to the success of the program. For example, when teachers of social studies, science, English, or family life education remind students, "If you or any of your friends experience personal problems related to any of these questions we've discussed today, remember that there's always someone at the SBYSP who has time to talk with you," and if they further suggest that students not wait for crisis but rather go to the SBYSP to talk while they're feeling confused, it often prevents negative actions. Unintended pregnancies, sexually transmitted diseases, and abuse of drugs and alcohol have all been reduced when this coordinated approach was put into effect.

In addition, when SBYSP and schools coordinate functions both groups benefit. In a key informant study and other interviews, school personnel often requested increased hours of orientation and in-service for faculty by SBYSP staff, while SBYSP staff consistently describe cooperative school functions with appreciation.

Referrals to the SBYSP counseling or health services are another school-community collaboration. Referrals come from community agencies, family courts, parents, and students themselves, but most often from teachers, guidance counselors, and school administrators. At the schools, a coordinated system of referral is developed in a series of meetings and revised when situations require additions or corrections.

Confidentiality

Confidentiality issues sometimes arise, but these have proven to be less of a problem than anticipated. Problems in this area are usually related to the fact that the counseling provided in SBYSPs follows the confidentiality guidelines of health and mental health providers. Referring teachers or guidance counselors are privy only to personal material that the child is willing to share and to the fact that the child is attending the program. Family secrets or embarrassing personal material are kept confidential. Referring sources have usually found this feedback sufficient and certainly preferable to referring a student to an agency miles away where confidentiality precludes any feedback. In addition, students are likely to request that the referring party be involved in the work that is accomplished.

Certification

Certification issues initially appeared to be a problem because schools in New Jersey were not allowed to have noncertified personnel on staff. This was addressed with the Department of Education and it was agreed that persons qualified in health, mental health, and social services who have certificates or licenses in their own fields would not also need teacher certification. This left local programs free to choose staff on the basis of expertise and experience

with young people. It was also agreed that noneducational services do not need a certificate.

The competence of site directors is key to each program. Site directors must have personal qualities consistent with the broad-based, unusual and demanding position they are assuming. They must be the type of person who will not be defeated in the face of multiple difficulties, who will visit the homes of children when appropriate, and who can communicate with all sectors of the community. When they also bring flexibility to their position, they are able to create programs that are remarkably successful.

These directors and their staffs work best when provided with continued training and forums in which they can learn from one another's experiences. An unusually low rate of staff turnover confirms the observation that the support provided directors by the Department of Human Services is often critical to their success. The neutrality of the Department of Human Services as the funding agent often makes it possible to facilitate meetings and work through problems these programs face as they develop.

Collaborative Programs Are Developing Across the United States

Throughout the nation, school districts are coming together with their community leaders to find ways to bring resources to families and children through schools. Charles Bruner, a former legislator from the state of Iowa and author of *Thinking Collaboratively: Ten Questions and Answers to Help Policy Makers Improve Children's Services* (1991), comments:

> Collaborative strategies may help to provide better assistance to families already receiving services in several systems; keep children from falling through the cracks and ensure that they receive needed services; and reduce environmental risks that affect all children in a given neighborhood or community.

The Department of Human Services receives many requests and visits from other state and local leaders about the School Based Youth Services Program. It is accomplishing its goal and changing to address more community concerns. In the end, the program should become community learning and resource centers. In the meantime, the model offered here provides a road map for state and local leaders to follow to develop collaborative programs that meet the needs of children, youth, and families.

Resource List

New Jersey School Based Youth Services Program

For more information, call Edward Tetelman, director, Legal and Regulatory Affairs, New Jersey Department of Human Services, at (609)292-1617, or Roberta Knowlton, director, New Jersey School Based Youth Services Program at (609)292-7816.

Bruner, C. (1991). *Thinking collaboratively: Ten questions and answers to help policy makers improve children's services.* Washington, DC: Education and Human Services Consortium. ED 338984

Carnegie Corporation. (1989). *Turning points: Preparing American youth for the 21st century. The report of the Task Force on Education of Young Adolescents.* New York: Author. ED 312322

Center for the Future of Children. (1992, Spring). *The future of children: School linked services, 1*(l), 144. Call or write Center for the Future of Children, 300 Second Street, Suite 102, Los Altos, California 94022. Attention: Dr. Richard Behrman.

Center for the Study of Social Policy. (1991). *Kids count data book: State profiles of child well-being.* Washington DC: Author. ED 328553

Mastny, A. Y. (Comp.). (1989). Linking schools and community services: Resources directory. Newark, NJ: Rutgers University, Center for Community Education. ED 318929. Call or write Center for Community Education, Rutgers University, Building 4087, New Brunswick, NJ 08903.

Melaville, A. I., & Blank, M. J. (1991). *What it takes: Structuring interagency partnerships to connect children and families with comprehensive services.* Washington, DC: Education and Human Services Consortium. ED 330748

Mendel, R. A., & Lincoln, C. A. (1991). *Guiding children to success: What schools and communities can do. Realizing America's hope.* Chapel Hill, NC: MDC, Inc.; Columbia, SC: SC Educational Television Network. ED 338982. South Carolina ETV, P.O. Drawer L, Columbia, SC 29250. (8-800-277-0829). A set of 3 booklets.

New Jersey School Boards Association. (1991, Sep/Oct). Taming the red tape: Coordinating the delivery of government agencies services for disadvantaged children. Special Issue of the *School Leader*. Call or write NJSBA, 413 West State Street, Trenton, NJ 08605, (609) 695-7600. Attention: Peg Lawler.

Robinson, E. R., & Mastny, A. Y. (1989). *Linking schools and community services: A practical guide.* Newark, NJ: Rutgers University, Center for Community Education. ED 318929

Smith, R. C. (1991). Let's do it our way: Working together for educational excellence. A handbook for community-school collaboration for the educational betterment of all our children. Chapel Hill, NC: MDC, Inc.; Columbia, SC: SC Educational Television Network. ED 338983

Palaich, R. M. (1991). Changing delivery systems: Addressing the fragmentation in children and youth services. Realizing America's hope. Denver, CO: Education Commission of the States; Columbia, SC: SC Educational Television Network. ED 339769

IX

Administrative Issues in Coordinated Children's Services: A Chicago Case Study

Mark A. Smylie
Robert L. Crowson
Victoria J. Chou

Introduction

An idea that appears to be catching on rapidly in public education is the notion that the neighborhood school should serve its community as a linchpin for children's services. The notion has historic roots in the turn-of-the-century Gary Plan of Willard Wirt, in the from-midcentury-on support of community schooling by Michigan's Mott Foundation, and in some of the Great Society experimentation of the 1960s. Nevertheless, it is only rather recently that an emphasis upon coordinated children's service delivery has developed—out of a rediscovered sense of crisis regarding the conditions of life, growth, and educational development among our nation's young.

An increasingly popular response to the sense of crisis in the delivery of children's services has been to develop strategies whereby an array of professional services can be brought together effectively for maximum child-development impact. Although experimentation in service coordination may now be found at many levels of government (e.g., state, regional, citywide, city sub-district), it is at the level of the individual school and its surrounding community that coordinated-services projects are receiving greatest attention. The evidence to date, however, indicates that by no means is experimentation in children's service coordination easy or smooth sailing. Indeed, fundamental issues in school-community relations, in across-professions interactions, in enlarged understandings of the school mission, in administrative controls and leadership, in school incentive structures, in communications systems, and in facilities usage—are all encountered in the coordinated-services endeavor (Crowson & Boyd, 1992)

It is the purpose of this chapter to examine carefully some examples of such administrative issues, within the context of a single four-school case in Chicago. The case grows out of a project initiated in September, 1989 and

supported heavily financially by the W. K. Kellogg Foundation—designed to offer children's services coordination through a university-school-community partnership in four low-income neighborhoods. The project has been labeled Chicago's Nation of Tomorrow Project, employing a long-ago proclamation by President Theodore Roosevelt that: "When you take care of children, you are taking care of the nation of tomorrow" (Nucci & Smylie, 1991).

The Case

In 1989, after a period of proposal development and negotiations extending from 1987 through 1988, the University of Illinois (in a project joining both of its campuses) inaugurated a four-school-site partnership with the public schools of Chicago (with full implementation in the fall of 1990). Primary funding for the 5-year project came from the W. K. Kellogg Foundation, with the administrative home for the project identified as the Center for Urban Education Research and Development on the Chicago campus of the University of Illinois.

The Nation of Tomorrow Project espouses an "ecological view of children's learning and development" (Nucci & Smylie, 1991); and it includes three major components of a service-collaboration approach to school improvement. A first component—Family Ties—offers parent and community outreach with a range of services from parent education to child-care and after-school youth programs, to social service coordination, to the identification/training of family advocate teams of community residents. Family Ties involves heavily the University's Cooperative Extension Service, in a major urban reconfiguration of the work of that agency.

A second component of the project—Partners in Health—uses the resources of the university (particularly the College of Nursing) to place additional health personnel and services in each project school, to reach out to parents and the community with information about health-care services and best-care practices, to link families and health providers, and to provide school-based health education.[1] Finally, the project also includes a third component—School Enhancement Activities—designed to assist school staffs with their own professional development and with improvements in schools as learning environments. Professionals from the health services, social work, physical education/recreation, cooperative extension, and education are those persons most heavily involved in the Nation of Tomorrow project.

There is an overall project director and there are project coordinators at each of the four sites—all charged with linking the three components and insuring effective connections (Nucci & Smylie, 1991). The sites are K-8 elementary schools in the Chicago communities of Austin, Englewood, West Town, and Pilsen.

The project continues with current funding through August of 1994. Observations about the project's accomplishments, struggles, and organization/evaluation are ongoing, with caveats aplenty regarding either the issues that appear to be most salient in administering children's service coordination or the means whereby administrative issues are resolved.

This chapter is but a beginning analysis of events surrounding an experiment very much in process at this time, with no effort to draw any defensible or definitive conclusions. This is a "here's what we see" effort, based heavily upon interviews with a range of project participants. It should be mentioned that the schools and the key personnel in this (fairly well publicized) project are easily identified, therefore our data and observations are sometimes pitched at a level of generality that may lose detail in the interest of protecting human subjects.

The Analysis

A common finding in evaluations of service-coordination experiments is that the projects have not been overly successful in changing (or integrating into) the ongoing cultures and operating procedures of their host schools (see Stake, 1986; Davis & Holliday, 1987; Wehlage, Smith, & Lipman, 1991). However, this common observation has received little elaboration or depth of analysis to date. Accordingly, three key administrative issues are examined below, midway into the life of the Nation of Tomorrow Project, as a bit of initial insight into the administrative difficulties accompanying service-coordination interventions.

Service Coordination and the Principalship

Principals spend a good bit of each day seeking within-school cooperation. Juggling time schedules; filling gaps in the work activities of the school (e.g., covering for a missing teacher); closely monitoring the school at busy moments (e.g., recess, lunch); finding and distributing supplies and equipment; settling person-to-person disputes and other flare-ups; encouraging staff to meet administrative deadlines; asking for a bit of help or extra effort from the staff (e.g., another committee assignment, an added pupil or two)—these are among the cooperation-producing endeavors of most principals on any given school day (Morris, Crowson, Porter-Gehrie, & Hurwitz, 1984).

These cooperation-producing activities permit principals to feel in control of organizations that are notoriously loosely coupled. To be or feel in control is important—for the principal bears the responsibility of things gone wrong anywhere in the school organization. This condition is much exacerbated in our Chicago case, since Chicago reform places the principal's very employment status directly at risk (in that it is contingent upon a local school council's periodic assessment of his/her performance).

Although the originators of the Nation of Tomorrow Project were careful to approach principals who would fully buy-in to the experiment, it quickly became apparent that the building principal's role in service coordination merits careful attention. The addition of services, plus increased numbers of educator and noneducator professional personnel, adds exponentially to the complexities and ambiguities of school leadership.[2]

There are also differing conceptions of just what collaboration means and what it means to lead a school toward cooperation. Amid differing notions of cooperation and working together, there is a tendency for individual components of a project to take off with a momentum and leadership of their own—for health, youth-service, family-advocate, or teacher-development professionals to operate in the manner in which they were trained, working within their own traditions of professional purpose and autonomy. In the words of one interviewee:

> It isn't clear that the schools have each become completely reconciled to all the new actors—to all the new things going on. There may be a sense to some of the principals of activities out-of-control, balanced against their sense of much greater responsibility for it all.

Administrative styles and personalities vary, therefore the means whereby principals have sought control over project activities have differed—from direct oversight and a top-down structuring of decisionmaking to the use of indirect controls, such as an active grapevine and/or informants or a close personal command of resource allocation and distribution in the school.

It should be mentioned again that the Nation of Tomorrow experiment has been simultaneous with one of the nation's most radical school-reform initiatives—a reform designed to debureaucratize and decentralize a city system reputed to be heavily over-managed. It would be quite understandable to find building principals now at greater individual responsibility and accountability, displaying a tendency toward an over-management of their own schools. It would also be quite understandable to find that a principal's old techniques of engendering cooperation and control fall short of successful control in schools offering a wide array of new services and discretionary professional endeavors. Perhaps yet to be fully understood and incorporated into the management of children's services coordination is the central point made by Leonard Baglow (1990, p. 393) that "Under cooperation no one agency controls the whole process."

Service-Coordination "Mentalities"

Despite the risk, responsibility, and intrusion, the Nation of Tomorrow Project has been a valued add-on to its participating schools. The project provides outreach services to the surrounding community that are vital to

principals who are now appointed by their communities. The project adds resources beyond those obtainable from the school system, and places an entrepreneurial press upon the administrators of the separate schools to obtain them. Moreover, the project has produced favorable publicity for its four schools, i.e., frequent visits from dignitaries, some positive newspaper articles, and good university public relations.

Nevertheless, the project's political value is also the source of a key administrative issue in its implementation. A common observation by university and other outside participants in the project is that the schools display a *resource* but not a *change* mentality. To the schools, the added services and added professional personnel appear to represent a wonderful opportunity to "take what we can get" over the short (5-year) life of a major foundation grant. It is quite understandable that principals would be reluctant to invest heavily in the major changes in school mentality that are asked by a project that may soon disappear.[3]

Thus, project participants have observed that a number of the "school people" have had difficulty "getting their heads around" the project's philosophy, and have had difficulty reconceptualizing the work of the school in terms that go beyond classroom instruction within the school's "four walls." As an example, there were reportedly some strains in the health services component of the project when the appointments in nursing personnel (nurse-professionals) were interpreted by school administration and staff simply as the addition of new, traditional school nurse services. The newly added nurse-professionals themselves, however, saw their responsibilities as proactively bringing the community in as part of a community model of school nursing. This has been one of the most perplexing change-the-schools issues in the entire project, commented one informant. Despite the community governance in Chicago's reform, "lots of folks are still thoroughly school-based. They don't see the term 'community'."

On the other side of the mentality coin, a tendency among the nonschool participants (particularly university faculty) in the project has been to approach their involvement in an extremely nondirective style. Written clearly into the very proposal for the Nation of Tomorrow Project was a help-the-schools strategy emphasizing an identification of needs by classroom teachers, with an allocation of school-enhancement resources and interventions only to that which the schools indicate as a need (bottom-up), not to that which the outside partners indicate as a need (top-down).

Nevertheless, the project proposal also recognized that classroom teachers might require assistance in collegial decisionmaking, which can produce a shared sense of needs. Thus, helping to empower teachers as true partners in the process was also a key part of the project's organizing philosophy. The idea was to build the capacities of the schools, and indeed other community institutions, to serve children—at least in part by assisting the schools' staffs in their capacities to learn to problem solve and to act.[4]

The central strain here, noted one interviewee, is that the partnership has been extremely difficult to develop. The expectations of many of the school personnel, continues this informant, are that:

> We're in a crisis here. Don't ask us to tell you what our needs are. We'd like to have some concrete suggestions and "answers." Spell it out, tell us what to do, bring us some programs, curricula, strategies, and materials that work.

Unfortunately, concludes the informant, it's just never been part of the organizational attitude of the schools to develop their own solutions. They tend to feel left-in-the-lurch by a project that asks them to. Indeed, mentioned another interviewee, the school people have tended to let it be known that they don't much like the game that's in process. As one teacher charged, "You're holding back on us. You really do have the answers; why this charade to have it all come from us?"

As can be expected, furthermore, not all of the outside partners have held fully to the project's nondirective dictum. Some outsiders have entered the schools pushing programs, changes, and research questions of their own, adding mixed messages and swaying the agenda toward the communication of the outsiders' mentality. Indeed, complaints by some actors holding true to nondirectiveness are that other partners have tended to deliver ready-made packages to the school ("here's an after-school program," "here's a nutrition program") rather than, again, proceeding programmatically from community or school needs. The issue here, however, is quite complex. As one knowledgeable informant observed:

> Yes, some folks are using prepackaged programs, but in some cases, providing tangible programs had to be done before doing it from scratch with the participants was an option. I believe this partially has to do with the university's previous track record of promising goods and not delivering, or teaching folks that they have all of the right answers.

Coordinating Service Coordination

In "The Iron Cage Revisited," DiMaggio and Powell (1983) warn that organizations tend to act in ways that increase their compatibility with the surrounding environment. As an organization of its own (or at least a quasi-organization), it might be expected that the administrative course of the Nation of Tomorrow Project would be influenced by the project's environments of the public school system, local community, and university. Along similar lines, it was noted earlier in this chapter that collaboration often brings together persons with stakes and mentalities in not-readily-compatible camps;

and it was noted that stable sets of arrangements already present in an organization tend to influence such important administrative tasks as accommodating risk (Shedd & Bacharach, 1991).

A small vignette brings this organization theory and its administrative implications to life. One of the most innovative and well received of the project components involves the direct employment of persons from the communities surrounding each project school. These community representatives, with training, engage in a variety of outreach activities with parents as part of the project's Family Ties component. The activities range from running tutoring and training programs, to offering information about child care and child development, working with latchkey children, helping parents find jobs, offering language (bilingual) assistance, and being a friend and resource to parents.

These community representatives are paid on a full-time basis by the university according to traditional civil service levels defined by formal experience and qualifications. Their commensurate pay rate is exceedingly low, at the bottom of civil service categorizations. This is considered an embarrassment (not an injustice) to project officers and is reportedly a source of tension with the recipients of these wages, who feel undervalued and overworked. Thus, the seemingly simple and straightforward (and presumably nonrisky) task of paying the people who work on a project (at an established rate) finds the stable arrangements of a civil service system apparently unadapted to project needs. Beyond the salary issue, the family advocates' roles have also been problematic in the school environments. These university-created jobs have been housed in schools unfamiliar with the workrole flexibility and autonomy that is typically awarded to university employees.

The administrative problem of one or more environments in uneasy juxtaposition also affects the Nation of Tomorrow experiment in the following significant way. On the university side of the partnership, decisions tend to be made in the manner in which universities make decisions. Committees meet, supervisory committees meet, levels of approval are established, jockeying for resources and participation incentives occurs, someone (usually with great difficulty) attempts to monitor budgets, faculty entrepreneuralism and house politicking is rewarded, and rather minimal administrative oversight occurs. On the school and community side of the partnership, decisions tend to be made in the manner in which schools make decisions. Although responsible to their councils, building principals, in one style or another, tend to run their schools.

True to a literature suggesting the importance of a facilitator or site coordinator role in children's service projects (Gray, 1991), the Nation of Tomorrow Project has established a site director in each school. These persons are charged with the new role of bringing the separate, participating institutional environments of schools, communities, and the university effectively together.

Understandably, this has been a difficult task. The individuals are generally expected to be highly accomplished go-betweens, negotiators, mediators, arbiters, and interpreters of one institution to another. They are also expected (and are eager themselves) to help the project along with initiatives and collaboration-generating activities of their own. The task is extremely tough, for neither the environment of the schools nor the environment of the university provides a ready-made legitimacy, job definition, or authority to such a role. Nevertheless, each institution simultaneously expects the site director to smooth any interactions with the other, despite some basic incompatibilities between their environments.

Conclusion

By no means should it be concluded from this discussion of administrative issues that insurmountable barriers are abroad in the land of coordinated services and that such projects as the Nation of Tomorrow are doomed efforts to bring about school improvement. Indeed, end-of-year interviews with teachers and other participants in the project schools have produced teacher comments, such as the following, with language that would have been unheard of in preproject times:

> One thing I really like is that the Nation of Tomorrow is really thinking about the needs of the children and, in doing so, helping teachers meet their needs. They have brought after-school programs to the children, which they have probably risen to the occasion to participate in. I'm sure that the teachers would rather see the children coming in after school participating in dancing, or sewing, or getting extra help.

> In formulating the after-school program, no class level was left out, no age group was treated as less important than another. Even the kindergarten was having input into what they were interested in, which was cultural things. Of course the health component is just marvelous. Having that and having a person who goes into the community and introduces herself to the parents and lets them know that there are services in the community that they can use helps them better manage their lives.[5]

Furthermore, the Nation of Tomorrow Project has addressed directly that which critics of Chicago school reform claim is the central weakness of the city's school reform to date: inadequate evidence of any instructional impact

upon teachers, classrooms, and students (see Bradley, 1992). Open-ended interviews with classroom teachers in the Nation of Tomorrow schools elicited such comments from four separate teachers as:

> I see the kids responding to me and using these new methods certainly makes them more enthusiastic. I see it affecting their self-esteem also.
>
> They spurred my thinking and desire to do more. We used our own creativity. They were like group leaders, not teachers. We shared and built it together. It was a group effort.
>
> As we approach the end of the year we see the difference in our teaching in September from now.
>
> I as an individual am growing from it. I feel very hopeful that something can be done for these children. (Levin, 1991)

Nevertheless, the magnitude of change that is expected in the culture of the public school under service-coordination experimentation suggests the need for continued, long-term study of ongoing projects and their varying forms of administrative adaptation. Experience thus far with this Chicago experiment suggests that along with cooperation arise new, yet-to-be-resolved questions regarding (a) the nature of administrative control in the service-coordinating schools; (b) the changed nature of school- and workrole-defining mentalities under service coordination; and (c) the impacts of new actors, representing differing professional environments, upon the key administrative structures in the school and university (e.g., reward systems, communications linkages, personnel systems, decision-making procedures).

Practical suggestions to-date for resolving such issues are few. Suggestions that have been made seem, interestingly, to offer a bit of new bureaucratization amid the ambiguities of it all. They include (a) set ground rules as to acceptable and unacceptable behavior among participants (Gray, 1991); (b) establish a communicative clarity (written guidelines) as to just what each service should expect from and report to the others (Zellman, 1990); and (c) establish a formal structure of participation, defining "who does what and who deals with whom" (Shedd & Bacharach, 1991, p. 146).

Such suggestions, ironically, may constrain as much as they clarify, possibly easing project administration but also possibly compromising activity and outcomes. A more practical set of suggestions awaits the results of a number of case studies that examine carefully how administrative issues such as those raised in the Nation of Tomorrow's Project are resolved. Far beyond such mechanics as ground rules, deeper structure issues await informative

analyses by participants and outside observers. These issues include building trust; learning how to work together; collaboratively finding shared interests between not-easily-meshed environments; and learning how to share problems of control, risk, and stewardship.

Endnotes

1. Partners in Health was not added at the outset because of budget limitations. It was begun in the 3rd year of the Nation of Tomorrow Project, with resources from the university and from a separate foundation. Its own much shorter history has thus been limited in the projects' track-record of administrative issues.

2. An added difficulty is encountered, of course, when there is principal turnover during the course of the project. Indeed, one of the schools experienced three separate principals in the project's first 22 months.

3. By no means is this mismatched mentality problem unusual. The extant literature reports a number of examples of difficulties in changing the professional atmosphere of a school toward a larger welfare-of-pupils and community-services orientation (see, particularly, Johnson, 1980; Farrar & Hampel, 1987; Muncey & McQuillan, 1991).

4. In the long run, it may be vital to the success of such cooperation to approach school change in just the nondirective manner outlined in the Nation of Tomorrow proposal. Theoretically, few persons will fully buy-in to that which they do not help initiate. In the short run, however, separate mentalities become a key administrative issue.

5. From the work of Rebekah Levin, project evaluator for the Nation of Tomorrow Project.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Baglow, L. J. (1990). A multidimensional model for treatment of child abuse: A framework for cooperation. *Child Abuse and Neglect: The International Journal, 14*(3), 387-395. EJ 416600

Baillie, S., DeWitt, L., & O'Leary, L. S. (1971). *The potential role of the school as a site for integrating social services.* Syracuse Policy Memorandum SYR 71-5. Syracuse, NY: Educational Policy Research Center, Syracuse University Research Corporation. ED 081088

Bradley, A. (1992, March 25). New study laments lack of change in Chicago classrooms. *Education Week, 11*(27), 1, 19.

Crowson, R. L., & Boyd, W. L. (1992, January). *Coordinated services for children: Designing arks for storms and seas unknown.* A report prepared for the National Center for Education in the Inner Cities, Temple University, Philadelphia. See EJ 460619

Davis, J., & Holliday, B. (1987, February 2). *A summary of quieting reform: Social science and social action in an urban youth program.* Washington, DC: Cities in Schools, Inc.

DiMaggio, P. J., & Powell, W. W. (1983). The iron cage revisited: Institutional isomorphism and collective rationality in organizational fields. *American Sociological Review, 48*, 147-160.

Farrar, E., & Hampel, R. L. (1987, December). Social services in American high schools. *Phi Delta Kappan, 69*(4), 297-303. EJ 363385

Gray, B. (1991). *Collaborating: Finding common ground for multiparty problems.* San Francisco: Jossey-Bass.

Johnson, D. et al. (1980). *Secondary schools and the welfare network.* London: George Allen & Unwin.

Levin, R. (1991). *University and elementary school faculty interview summary, Nation of Tomorrow Project.* Unpublished report, Center for Urban Education Research and Development, College of Education, University of Illinois at Chicago.

Morris, V. C., Crowson, R. L., Porter-Gehrie, C., & Hurwitz, E., Jr. (1984). *Principals in action: The reality of managing schools*. Columbus, OH: Charles E. Merrill Publishing Co.

Muncey, D., & McQuillan, P. (1991, April). *The meetings of many worlds: Professional development in a grassroots educational reform movement*. The School Ethnography Project, Brown University. Providence, RI: Working Paper #4.

Nucci, L. P., & Smylie, M. A. (1991). University-community partnerships: Addressing problems of children and young through institutional collaboration. *Metropolitan Universities, 2*(1), 83-91.

Shedd, J. B., & Bacharach, S. B. (1991). *Tangled hierarchies: Teachers as professionals and the management of schools*. San Francisco: Jossey-Bass. ED 354586

Stake, R. E. (1986). *Quieting reform: Social science and social action in an urban youth program*. Urbana: University of Illinois Press.

Wehlage, G., Smith, G., & Lipman, P. (1991, May). *Restructuring urban schools: The new futures experience*. Madison, WI: Center on Organization and Restructuring of Schools, School of Education, University of Wisconsin-Madison. See EJ 446636

Zellman, G. L. (1990, Spring). Linking schools and social services: The case of child abuse reporting. *Educational Evaluation and Policy Analysis, 12*(1), 41-55. EJ 414309

X

Children's Services and Urban Teacher Education: Beginning the Conversation

Mary Bay
Sabrina Hope King
Victoria J. Chou

Introduction

The last decade has seen intense, prolonged attention paid to the quality of teachers and to the teacher education programs that prepare teachers. On the one hand, those who attribute problems of students' inadequate education to the poor quality of the teaching force have called for more rigorous performance standards for teachers as a partial solution (Goodlad, 1984, 1990; Sarason, 1993). Those who believe that teacher quality is related to teachers' insufficient content knowledge suggest strengthening prospective teachers' liberal arts experiences (e.g., Carnegie Form, 1986; National Commission on Excellence in Education, 1983). We have witnessed increased requirements in prospective teachers' liberal arts, general education course work, with a concomitant decrease in the professional education curriculum.

On the other hand, some have laid the responsibility for teacher quality at the door of teacher educators and professional education programs themselves. In rallying to respond to the need for improved professional education programs, again, several trends are evident. Descriptions of productive university partnerships with school personnel that go far beyond mere clinical placement arrangements have dominated much of the teacher education literature in recent years (e.g., Holmes Group, 1986, 1990). These partnerships have contributed much to teacher educators' understandings of theory-to-practice connections, power and authority in institutional relationships, and teaching practice as lifelong learning that does not stop once student teaching is completed. In addition, teacher education curricula in many institutions have been reconceptualized to be much more inquiry oriented, promoting the virtues of reflection, experimentation, and responsible decision making (Clift,

Houston, & Pugach, 1990; Cochran-Smith, 1991; Goodman, 1988; Zeichner & Liston, 1987). Key to the reconceptualization is the recognition that knowledge of the learner is central to good teaching. At some level, of course, we have always known this tenet. However, in a world where teachers and learners are increasingly of different cultures, operationalizing child study so that culturally relevant pedagogy can be designed to address children's learning needs is a challenging, sometimes daunting task for teacher educators.

Most recently, yet another idea has surfaced on the teacher education landscape—an idea that has caught on rapidly—the notion that prospective teachers must be prepared to capitalize upon the children's services that exist in a school and its community. In this chapter, we offer our definition of and rationale for a children's services approach. Next, we present the case for linking this perspective to urban teacher education programs. Finally, we close by sharing some starting points for teacher educators who are interested in this approach. In so doing, we wish to convey our sense of hopefulness that the idea of capitalizing upon children's services may serve teacher education programs by providing a useful contextual framework for thinking about teachers' and teacher educators' knowledge, skills, beliefs, and dispositions.

Children's Services: A Definition and a Rationale

Terms such as *coordinated children's services, integrated children's services,* and *full-service schools*, for example, have been put forth to describe a variety of programs that aim to link schools with communities. In this chapter, we use the term children's services to mean all services—formal and informal—provided to children and youth that affect their educational, social, economic, political, and physical well-being. Such services include (but are not limited to) parenting, schooling, health care, foster care, drug rehabilitation counseling, religious guidance, and community-based family support programs. Coordinated children's services refers to a planned network or collaboration of services such as those just mentioned, which collectively aim to "form an implacable nexus between the cultural and familial experiences of children and youth and their social and psychological adjustment to the school environment" (Comer & Haynes, 1991, p. 68).

The availability of children's services in schools is not always evident. Newly inducted teachers often learn of the availability of these services through word of mouth within a school or through personal investigations conducted to find support for a particular student. Although we recognize the distinction between programs that offer children's services in a coordinated fashion and those that offer children's services in an isolated manner, we will not emphasize this difference in our discussion. We think that prospective teachers, particularly those who are preparing to teach urban youth, must learn about children's services whether or not they are coordinated.

Inherent in the notion of a children's services approach is the recognition on the part of teachers and other professionals that working interdependently as opposed to working independently affords greater chances of effecting change in students' lives. School, community, and familial institutions are clearly implicated in the notion of coordinated services. For instance, the Nation of Tomorrow Project, a 5-year (1989-1994) partnership among the University of Illinois, the W. F. Kellogg Foundation, and four schools and their communities in Chicago, targets four primary institutional influences in children's lives: the family, the school, community child care and youth opportunities, and community health care agencies. (See chapter IX for a description of the project.) With the university as initiator, the project strives to establish working relationships among all parties to effect positive changes in children's learning and development as well as significant changes in institutions' traditional ways of conducting their business. (See Crowson & Boyd, 1993, for other examples of coordinated service projects and experiments.)

Crowson and Boyd (1993, pp. 143-144), in an extensive review and critique of coordinated children's services efforts, argue that we must find solutions to impediments of interinstitutional cooperation "because the conditions of life and educational development for children (and particularly poor children) are in a deep state of crisis." Nowhere is this more evident than in urban communities where too many children go hungry, lack basic health care, and live in unsafe conditions, amid violence and exploitation (National Commission on Children, 1991). As Kirst and McLaughlin (1990, p. 75) declare "(now) business as usual in children's services is not good enough." This is not to say that the journey to interinstitutional coordination or collaboration has been an easy one (cf. Crowson & Boyd, 1993; Kirst, 1991). Daunting administrative problems remain to be faced: splintered professional preparation, state legal and procedural restrictions, turf battles, information system weaknesses, leadership gaps, the "politics" of coordination (e.g., the "coordination game)", and school-to-community credibility (Kirst, 1991).

In recent years, the school has come to be appreciated as a natural locus for coordinating children's services. We can identify several possible reasons for this. First, although schools have always served as centers for delivery of social services, albeit not necessarily in any coordinated fashion (though there are notable exceptions), recent school reform activity and greater local control on the part of parents/guardians in school decision-making and governance issues has enabled and/or encouraged the development of partnerships between family and school personnel (e.g., Hopfensberg, Levin, & Associates, 1993). Further, externally funded projects such as the Nation of Tomorrow seek to increase the involvement of community members and agencies in school governance as well as to provide human and financial resources. Schools are the ideal site for brokering children's services (Crowson & Boyd, 1993). Last, recent initiatives such as the Inclusive Movement have incited

interest in educating all children in their home or neighborhood schools, including children with moderate to severe intellectual, social, and physical challenges (e.g., Stainback & Stainback, 1988).

Children's Services: Urban Teacher Education Connections

We propose that one mechanism for helping prospective urban teachers familiarize themselves about their students' life experiences is to provide opportunities for future urban teachers to learn about and avail themselves of children's services within school and community settings. Because teachers are in a powerful position to guide and influence youth, they must be attuned to their students' life experiences and integrate that knowledge into their teaching. This is particularly important in communities where children are confronted with the challenges of the urban setting. Unfortunately, research suggests a current and potential teaching force whose life experiences are often different from those of the children they are teaching (Ogle, Alsalam, & Rogers, 1991; Alsalam, Ogle, Rogers, & Smith 1992; National Education Association [NEA], 1991).

One particularly striking aspect of the incongruence that may exist between the urban teacher and her or his students involves the notion of culture. The most overt indicator depicting a lack of cultural congruency is the fact that the culture of urban children, many of whom are African American and Latino, differs markedly from the culture of their teachers, the majority of whom are Euro-American (American Association of Colleges for Teacher Education [AACTE], 1990; NEA, 1991). Demographic data reveal that the cultural gap may be widening as a result of increasing numbers of children of color in our schools as well as the exodus away from the education profession by teachers of color, particularly, African Americans (King, 1993).

Developing prospective urban teachers' awareness of children's services within a teacher education program enables them, we believe, to question their pre-existing conceptions of urban students' knowledge, experiences, capabilities, and resources. In so doing, they reconceptualize their roles and responsibilities as classroom teachers. In making this argument, we note that a substantial body of research indicates that prospective teachers enter teacher education programs with previously constructed ideas and beliefs about the nature of knowledge, how children learn, and the role of the teacher (e.g., Goodman, 1988; Grossman, 1989; Hollingsworth, 1989; Holt-Reynolds, 1992.) Because teacher candidates are the products of years of classroom observation and early learning experiences occurring in schools, homes, and communities, they come to teacher education programs with well-defined views about what children are like and what works with children (Lortie, 1975)—what constitutes the "educational good" (Oberg, 1986).

Future teachers believe they hold the attributes necessary for effective teaching and that through the force of their own personalities they will be able

to make a difference in children's educational lives (Holt-Reynolds, 1992; Pajares, 1993). They often form generalizations about children based on references to themselves as students (Goodman, 1988; Hollingsworth, 1989) and they perceive the role of the teacher as one who reproduces society, not as one who transforms it (Edmundson, 1990). Clearly, these beliefs are not always illuminating or helpful, especially in urban settings, yet they are powerful and act as a screening device through which prospective teachers filter curricular content, experiences in classrooms, and interactions with children and university and school personnel.

Pitted against these pre-existing beliefs and prior learnings, teacher educators experience difficulty when attempting to change or modify their students' views (Ball, 1988; Buchmann & Floden, 1992; Holt-Reynolds, 1992; McDiarmid, 1990; Zeichner & Liston, 1987). A teacher education program that incorporates a children's services approach challenges future teachers' prior learnings and creates conditions wherein they not only explore their beliefs about good teaching, but also consider other images of the teacher and the learner. By working with parental involvement networks, the school community, community agencies, and child service professionals, prospective teachers can capitalize on the vast resources existing in a community; expand their knowledge base regarding the culture of their school; reflect on how their pupils' school, family, and community experiences may be different from their own childhood images; and work collaboratively with others who are involved with these youth to create educational experiences that will enable their students to be successful.

Lest the reader sees us as painting a singularly rosy picture of the ease with which teacher educators can accommodate a view of teaching and learning in the context of a children's services framework, we wish to share from our respective experiences a caution. We are concerned about the extent to which this view competes with other teacher education approaches. Based on our work with colleagues and our reading of the literature, we think many teacher educators are interested in designing programs that are oriented toward the goal of greater teacher autonomy with respect to classroom and school-level decision making. Through such an approach, teachers are encouraged to reclaim their classrooms and their profession.

This teacher empowerment approach may not be consistent with the forced team player approach that an integrated children's services model suggests (Crowson & Boyd, 1993). In the coordinated services school, teachers will be part of a team that works interdependently to design effective educational programs for all children. As a member of a team, for example, teachers will most likely work with social workers, who may suggest different managerial routines for the classroom; with parents and community representatives, who may offer ideas for learning activities they believe to be more culturally relevant; and with health professionals, who may be partners in designing new

curricula. Teachers may suddenly find themselves in a situation where control over life in the classroom is shared. They are one voice among many in the process of making decisions about classroom events, and teachers' independent inquiries may lead to different conclusions from others about what works best for individual children.

How can teacher educators create programs that foster teacher empowerment through critical analysis of one's teaching while simultaneously promoting collaborative efforts in the design of children's educational programs? To accomplish this task, teacher educators could offer programs that encompass multiple images of the classroom teacher: one who looks critically at her own work in classrooms; one who deliberates among competing views of teaching and learning; one who effectively communicates his views about children; and one who reconstructs taken-for-granted assumptions about teaching based on self-evaluation and input from others. In this way, the two approaches to teacher education may be compatible.

Children's Services: Starting Out

As should be obvious from the foregoing discussion, we see many positive virtues to the notion of preparing prospective teachers to work in schools that are sites for integrated social services. Nevertheless, although we, too, promote the idea of preparing future teachers to function in collaborative ways with other social and health professionals, the topic is virtually unexplored. Much about the complexity remains unknown. Yet, the notion is that if school and teacher education improvement efforts "are to be successful, collaboration among all members of the professional education community and the broader social community is necessary" (Pallante, 1993, p. 27). Though how to set about preparing prospective teachers is not as straightforward a task as it may initially appear, we report here, from our recent experiences, some starting steps.

To begin the process, teacher educators can initiate an ongoing conversation about teacher education with parents, community representatives, and child-care providers. Through an exchange of ideas and information, teacher educators can learn about the community, its cultural richness, its financial and human resources, as well as its dilemmas and challenges. In turn, parents, community members, and child-care professionals can learn about the curriculum of the university's teacher preparation program as well as about the program's students, their hopes, their ambitions, and the dilemmas and challenges facing urban teacher educators. Early conversations could focus on exploring the need for teacher education restructuring so that teacher educators can better prepare their students to teach successfully in urban schools. Such dialogue should provide opportunities for participants to understand others'

expectations for teacher preparation programs. With increased understanding, individuals can work toward identifying mutual goals and developing collaborative efforts.

A second way in which teacher educators can prepare future teachers within the context of children's services pertains to the curriculum of the teacher preparation program. As students progress through their program, they need to acquire increasingly sophisticated understandings of the services child-care professionals, community agencies, and other community members provide, and they need to develop the skills necessary for effective collaboration. In the early stages of the teacher education program, preservice students' awareness of the roles and responsibilities of child-service professionals and others can be enhanced through such activities as guest lectures and panel presentations. Through exposure to other's work and experiences, preservice students can learn about various, perhaps competing, views of teaching and learning. Field experiences might include touring the community and attending school board meetings

As future teachers progress through the program, they can deepen their knowledge of children's services in several ways. Case study analysis, parent interviews, and shadowing a child-care professional or a community member can reveal the many ways parents and others interact with children, influencing their lives at home and in the classroom. The prospective teacher's field work might include identifying a child who is receiving services from several professionals and shadowing him or her for a week. In this way, the preservice student can develop a sense of the child's experiences, paying particular attention to the continuities or discontinuities that occur among school, home, and community events. Ideally, this assignment would lead to the development of lessons and units of instruction that would build upon the child's total experiences, using the domains of home, school, and community as organizers for a pluralistic curriculum. Students who are in the final stages of the teacher education program need to work directly with others in the design and implementation of instructional programs. Under careful supervision, these students can work with parents, other teachers, and child-care professionals in such settings as curriculum development committees, multidisciplinary staffings, annual review conferences, and interagency council meetings. These experiences allow prospective teachers to witness and participate in the process of coordinating children's services. Specifically, preservice students can share their knowledge of children, hone collaborative skills, and continue to analyze and improve their teaching with the benefit of guidance from mentor teachers and university personnel.

Yet another way in which teacher educators can prepare future teachers within the context of children's services is by allowing these students opportunities to observe collaboration in action. If teacher educators expect preservice students to demonstrate actions associated with shared decision

making, then they must model these behaviors as part of their work in the teacher preparation program. Partnership and collaborative efforts can be modelled in several ways. For example, teacher educators can co-teach with other members of the faculty or with child-service professionals from the community; and they can develop curricula with representatives from various disciplines. The critical and challenging element, however, is for teacher educators to find ways in which the steps involved in working collaboratively can be made explicit so that prospective teachers witness not only the behaviors associated with collaboration but also the thinking that led to the action. In other words, preservice students would benefit from observing teacher educators in the process of exchanging ideas, presenting competing views, deliberating, working toward consensus, sharing responsibilities, and influencing each other's actions with respect to curricular and instructional issues.

Finally, throughout the duration of the program, teacher educators will want to encourage students to explore their beliefs about the children they will teach, about the neighborhood school and its community, and about their role as teachers. Those engaged in teacher education must find ways to stir their students' ideas, challenge their tightly held assumptions, and create bridges to learning about other cultures and experiences.

Conclusion

Clearly, it behooves teacher educators to assist prospective urban teachers to learn about the potential value of children's services in school settings. Several benefits are immediately obvious. To begin, such preparation will provide a mechanism for attuning prospective teachers' sensitivities to students' life contexts and for shaping their beliefs and attitudes about the students with whom they will work. In turn, informed teachers will be able to capitalize upon services that benefit their students, whether teachers avail themselves of services directly for their students or whether teachers are empowered to refer others to in-school services. Finally, while teachers and teacher educators know that the health, social, and emotional well-being of children and youth affects their performance in school, they, too, have highly specialized knowledge about students that should be shared with other professionals. All those involved with children and young adults need to be part of a collaborative network that addresses our youth's needs so that they can experience educational success.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Alsalam, N., Ogle, L. T., Rogers, G. T., & Smith, T. M. (1992). *The condition of education, 1992.* Washington, DC: National Center for Educational Statistics.

American Association of Colleges for Teacher Education [AACTE]. (1990). *Teacher education pipeline II: Schools, colleges, and departments of education enrollments by race and ethnicity.* Washington, DC: Author. ED 328549

Ball, D. L. (1988). *Unlearning to teach mathematics.* Issue Paper #88-1. East Lansing, MI: National Center for Research on Teacher Education. ED 302382

Buchmann, M., & Floden, R. E. (1992, April). *Coherence, the rebel angel.* Paper presented at the annual meeting of the American Educational Research Association, San Francisco. See ED 344875

Carnegie Forum on Education and the Economy, Task Force on Teaching as a Profession. (1986). *A nation prepared: Teachers for the 21st century.* Washington, DC: Carnegie Corporation of New York. ED 268120

Clift, R. T., Houston, W. R., & Pugach, M. C. (1990). *Encouraging reflective practice in education.* New York: Teachers College Press.

Cochran-Smith, M. (1991). Learning to teach against the grain. *Harvard Educational Review, 61*(3), 279-310. EJ 432149

Comer, J. P., & Haynes, N. M. (1991). Meeting the needs of black children in public schools: A school reform challenge. In C. V. Willie, A. M. Garibaldi, & W. L. Reed (Eds.), *The education of African-Americans* (pp. 67-71). Westport, CT: Auburn House. See ED 339757

Crowson, R. L., & Boyd, W. L. (1993). Coordinated services for children: Desigining arks for storms and seas unknown. *American Journal of Education, 101*(2), 140-179. EJ 460619

Edmundson, P. J. (1990). A normative look at the curriculum in teacher education. *Phi Delta Kappan, 71*(9), 717-722. EJ 406901

Goodlad, J. I. (1984). *A place called school: Prospects for the future.* New York: McGraw-Hill. ED 236137

Goodlad, J. I. (1990). *Teachers for our nation's schools*. San Francisco: Jossey-Bass. ED 330655

Goodman, J. (1988). Constructing a practical philosophy of teaching: A study of preservice teachers' professional perspectives. *Journal of Teaching and Teacher Education, 4*(2), 121-137. EJ 381066

Grossman, P. L. (1989). Learning to teach without teacher education. *Teachers College Record, 91*(2), 191-208. EJ 401625

Hollingsworth, S. (1989). Prior beliefs and cognitive change in learning to teach. *American Educational Research Journal, 26*(2), 160-189. EJ 409697

Holmes Group. (1986). *Tomorrow's teachers: A report of the Holmes Group*. East Lansing, MI: Author. ED 270454

Holmes Group. (1990). *Tomorrow's schools: Principles for the design of professional development schools*. East Lansing, MI: Author. ED 328533

Hopfenberg, Levin, & Associates. (1993). *Accelerated schools*. New York: Teachers College Press.

Holt-Reynolds, D. (1992). Personal history-based beliefs as relevant prior knowledge in course work. *American Educational Research Journal, 29*(2), 325-349. EJ 449455

King, S. H. (1993). The limited presence of African-American teachers. *Review of Educational Research, 63*, 115-149.

Kirst, M. W. (1991). Improving children's services: Overcoming barriers, creating new opportunities. *Phi Delta Kappan, 72*(8), 615-618. EJ 424367

Kirst, M. W., & McLaughlin, M. (1990). Rethinking policy for children: Implications for educational administration. In B. L. Mitchell & L. L. Cunningham (Eds.), *Educational leadership and changing contexts of families, communities, and schools*. Chicago: University of Chicago Press. See ED 323637

Lortie, D. C. (1975). *Schoolteachers: A sociological study*. Chicago: University of Chicago Press.

McDiarmid, G. W. (1990). *Tilting at webs of belief: Field experiences as a means of breaking with experience*. Research Report 89-8. East Lansing, MI: National Center for Research on Teacher Education. ED 318694

National Commission on Children. (1991). *Beyond rhetoric: A new American agenda for children and families. Final report of the National Commission on Children*. Washington, DC: Superintendent of Documents, U.S. Government Printing Office, Stock No. 040-000-00559-5. ED 336201

National Commission on Excellence in Education. (1983). *A nation at risk: The imperative for educational reform. An open letter to the American people. A report to the nation and the Secretary of Education*. Washington, DC: Superintendent of Documents, U.S. Government Printing Office, Stock No. 065-000-00177-2. ED 226006

National Education Association [NEA]. (1991). *Status of the American public school teacher 1990-1991*. Washington, DC: Author.

Oberg, A. (1986, April). *Staff development through individual reflection on practice.* Paper presented at the annual meeting of the American Educational Research Association, San Francisco.

Ogle, L. T., Alsalam, N., & Rogers, G. T. (1991). *The condition of education 1991. Volume 1: Elementary and secondary education.* Washington, DC: National Center for Education Statistics. ED 330121

Pajares, F. (1993). Preservice teachers' beliefs: A focus for teacher education. *Action in Teacher Education, 15,* 45-54.

Pallante, J. A. (1993). Selected perspectives on teacher reform efforts. *Action in Teacher Education, 15,* 25-33.

Sarason, S. B. (1993). *The case for change: Rethinking the preparation of educators.* San Francisco: Jossey-Bass.

Stainback, S., & Stainback, W. (1988). Educating students with severe disabilities. *Teaching Exceptional Children, 21*(1), 16-19. EJ 378825

Zeichner, K. M., & Liston, D. P. (1987). Teaching student teachers to reflect. *Harvard Educational Review, 57*(1), 23-48. EJ 351847

XI

The Principal's Role in Comprehensive Student Services for Empowerment of Students and Families

Colleen A. Capper

The principal's role in comprehensive student services is shaped by the view the principal has of these services. Comprehensive student services can no longer be viewed as support to the academic program for special case students—like the traditional special education and pupil services model. That is, comprehensive student services cannot be viewed only as a support for students who fail to succeed in the traditional school program.

In contrast to the traditional school program, principals must view education as a net to catch and propel students into an empowered future. From this empowered perspective, principals can view student services along with the school curriculum, instruction, and culture as integral strands of the education net that encompass the school, community, and student families. Viewed in this way, principals do not redesign student services independently of restructuring the curriculum, instruction, and culture of the school—but instead, they weave all four components together into a holistic process of addressing the education/empowerment of all students. Principals consider the school's curriculum, instruction, and culture to be student services, along with traditional and emerging services (e.g., guidance and counseling and alcohol and other drug addiction support services). Similarly, principals inextricably link traditional and contemporary student services to the curriculum, instruction, and culture of the school.

This view/philosophy of comprehensive student services—as an interrelated, enmeshed entity of the school's core aimed for empowerment—needs to be a fundamental premise that guides principals' values and actions and principals' preparation in relation to comprehensive student services. This chapter will describe the values principals need to hold, actions they need to take, and principal preparation programs that could support these values and actions. I arrived at these recommendations by (a) talking with principals and a home-

school liaison involved in the development of a comprehensive student services program, (b) reviewing comprehensively the literature in pupil services and special education,[1] and (c) juxtaposing these interviews and literature alongside a multiparadigm framework for educational administration. Before discussing the framework and recommendations, I will first describe the methodology of my work and what I learned. While each state/community's uniqueness can shape what works in student services, to protect the anonymity of participants, I do not disclose the specific location in which my work is based.

Gathering Information

I purposively selected three principals for in-depth interviews concerning comprehensive student services. I selected one each at the elementary, middle, and high school levels. I selected two from an urban community and one from a rural community. One urban school has been targeted as one of two schools in this urban district to serve as a pilot site for a comprehensive, coordinated student services program for the 1992-93 school year. A social worker who serves as the home-school coordinator at this school is one of eight members of a citywide team whose task is to design the pilot comprehensive student services project. Neither the other urban school nor the rural school have a formal system of comprehensive services with their communities, but both principals are directly involved in coordinated student services at the building level. The rural school principal chairs a countywide team of agency representatives to address child maltreatment. Each principal was interviewed in person from 1-2 hours, and the social worker was interviewed by phone for 2 hours, prior to the start of the 1992-93 school year. The interviews focused on the principal's role in comprehensive student services in their schools.

The interview questions included questions about the extent of comprehensive student services currently in their school, their role in these services, what they felt their role should be, the strengths and weaknesses of the current services, the organizational factors that support and impede services, how the services influence their day-to-day work, and their opinion on how state-of-the-art comprehensive services would appear and their role in it. Finally, they were asked to make suggestions for administrator preparation programs.

While the interviews were certainly not meant to represent all principals in similar situations, or to represent a comprehensive study of the topic, the results can be used to illustrate factors that can potentially shape the principal's role in comprehensive student services, and can be used as a preliminary guide for future research and practice. Further, interviews with the principal and social worker provided information to describe a pilot comprehensive student services process, Community Crossroads—the first of its kind in the state.

Community Crossroads

A combination of agency leaders and line workers, and city and county government officials in a large city developed the Community Crossroads program, initially to place community agency representatives into the school itself. According to the interview participants, the impetus behind Community Crossroads was described as partially political: to consolidate so-called wasted resources in human services, welfare, and the police department into one central location, with hopes of increasing services without increasing costs.

The coordination and functioning of Community Crossroads are facilitated by three groups of people at three different levels. First, the United Way provided a person to facilitate the meetings of an eight-person team, purposively selected to be representative of front-line people in a variety of agencies, including social services, the police department, health nurses, mental health services, and education. In this discussion, this group is referred to as the *development team*.

Second, the development team is monitored by a citywide Coordinating Council, which includes the administrators of all the agencies—a council that has been in existence for many years, and was initially established at the initiative of city, county, and agency leadership. The agencies all donated 4 to 8 hours per week, for approximately 6 months, without concrete parameters around the goal or process of the development team's task. The development team designed a process rather than a delivery model, which replicates the model of the city police department's highly successful community officer program. In this model, a police officer is assigned to a neighborhood and literally walks around the neighborhood during her/his beat time, addressing needs as they arise.

A third group of people comprise a Neighborhood Council, formed in two neighborhoods in the city to serve as both a clearinghouse and a provider of direct services, with a focus on prevention. The two neighborhoods were targeted because both have the highest concentrations of people of color who are low income, and the highest crime rates in the city. Neighborhood Council members include representatives of the police department, school, human services, private and public mental health providers, businesses, public health nurses, and the neighborhood.

The Neighborhood Council first conducts a neighborhood assessment, not by using a written survey, but by talking with people in the neighborhood. Then the Neighborhood Council matches needs with resources. Each Neighborhood Council member is present in the community 8 hours per week, in addition to attending two council meetings a week. During the required 8-hour time commitment, for example from 4:00-8:00 P.M. twice a week, Neighborhood Council members roam the neighborhood. In the Neighborhood Council meetings, they discuss a maximum of five families, targeted for

services. Council members selected these families by consensus based on the severity of family needs. In addition to other activities, volunteers from the neighborhood community form a Welcome Wagon to match new community people to services, which encourages new residents who may pose a crime problem to either be supportive of community peace or to leave the neighborhood. This is one way to for community people to be empowered rather than community people isolating themselves in their homes.

The Neighborhood Council focus is not case management, for example, where they gather in a central location and bring in services. In contrast, the council seeks to be more flexible than case management by taking a global, holistic perspective of the community and family in relation to the student, rather than a narrow perspective that isolates student problems in the school.

Although the Coordinating Council initially conceptualized Community Crossroads as a means to coordinate student services within the school, the development team decided it was the system that needed to adjust itself to the community. Therefore, the student, and the student's milieu within their family and community became their focus, and as a result they are seeking to coordinate services, including educational services, within the community.

Even though the primary goal of comprehensive student services, like Community Crossroads, is the empowerment of students and their families and community, inadvertent accomplishments have resulted from the interaction of the development team itself. The development team members learned that agencies have a number of similarities in terms of structure, purpose, and functioning, and they also may encounter similar obstacles to comprehensive services that if shared, could benefit everyone. Agency interaction in team meetings resulted in (a) a means to share ideas across agencies on particular clients and (b) a means to share knowledge among the agencies, including their goals, obstacles to services, and day-to-day work lives of agency workers. For example, members on the Community Crossroads development team asked the human service workers to describe their typical work day. They found that these workers spent the majority of the day sitting and waiting in the halls and corridors of the courthouse. The home-school liaison noted he would strongly hesitate to call a human services worker and complain about their lack of follow up on a student, because he realized they just don't have the time to do that. He now is more clear about what to expect from the agencies and he will take more responsibility for students.

Initiatives like Community Crossroads hold great promise for all students and their families and communities. The success of any process, model, or program for comprehensive student services depends, however, on the underlying assumptions and paradigm perspectives of those in power—in the school, the principal.

The principal's role in comprehensive student services, the associated demands, and needed training, depends on the underlying assumptions or paradigms that inform the principal's work. Capper's (1993b) multiparadigm approach for educational administration is derived from the work of Burrell and Morgan (1979) and Sirotnik and Oakes (1986). This approach is oriented, in part, along the axes of objectivity/subjectivity and social regulation/emancipation. These axes form three paradigms that can be associated with different types of comprehensive student services: (1) the traditional paradigm and comprehensive student services for efficiency and effectiveness, (2) the interpretivist paradigm and comprehensive student services for meaning, and (3) the critical theory paradigm and comprehensive student services for social change. All three paradigms are necessary for a comprehensive student services program for empowerment. Often, however, student services are informed only by the traditional or interpretivist paradigms, and the critical theory paradigm is not considered. From a comprehensive student services for empowerment perspective, each paradigm that informs it has values and dangers.

The Traditional Paradigm: Comprehensive Student Services for Efficiency and Effectiveness

While often seeking to make improvements in the operation of the educational machine, principals in the traditional paradigm accept its basic structures and roles, and the societal context that schools serve. They are interested in understanding how institutions work, and how the educational bureaucracy might be made more efficient via bureaucratic management and control. The traditionalist's assumption is that various forms of social injustice can be corrected while maintaining existing systems intact.

Its values. The traditional paradigm can be used to guide systematic and standardized data collection for student services. For example, with Community Crossroads, data could be collected to track the process and outcomes of community referrals, and to determine how student service agencies had to change routines and policies to implement the project. For principals operating primarily out of the traditional paradigm, their concern about the welfare of their students would be facilitated by the efficiency and effectiveness of student services.

Its dangers. The principal's role under the traditional paradigm emanates from a top-down model of administration, to initiate and coordinate the services. The principal's role in this paradigm also reflects a traditional position with special education services. That is, some principals in this traditional role by virtue of personal preference or district expectations rely on a distant district-level administrator to manage these services in school, rather

than taking direct responsibility for the education of students who require support.

Comprehensive student services from the traditional paradigm could also influence principals to advocate for support services without considering changes in the instructional system; to encourage a system of referral, labeling, and placement of students into existing slots and programs; to promote short-term relief strategies like suspensions and alternative schooling; and to rely on an expert model of building teams to accomplish these strategies. From this perspective, teachers could tend to rely on, and thus, refer their problems to a permanent team of special service professionals, rather than acquire resources from student peers, other teachers, parents, or community members. To avoid these dangers, we can look to the interpretivist and critical theory paradigms.

The Interpretivist Paradigm: Comprehensive Student Services for Meaning

The interpretivist paradigm suggests that organizations are subjective social constructions existing only in the perceptions of people. Supported by the arguments of Greenfield (1984), an interpretivist approach to the principalship focuses on the meaning of interactions as perceived by individuals, rather than on so-called objective reality. Interpretivists share the traditionalist assumptions that the existing social order and its institutions are necessary and without limitations. While traditionalists are concerned with how organizations function, interpretivists are concerned with how people experience them.

Its values. Principals operating out of the interpretivist paradigm focus on a humanistic goal of meaningful education for all students. Concerned with the welfare of their students, and with some concern for the efficiency and effectiveness of their school program, these principals hope that student services make the lives of their students more meaningful. The principal's role in such an approach is one of facilitation and encouragement of the delegation of individual tasks to staff members via collaboration.

Its dangers. Similar to a human relations approach, one danger of the interpretivist perspective is that principals may emphasize "getting along" with one another, but not challenge educational practices that limit student potential based on race, gender, social class, or other characteristics. Principals who are advocates of this approach may not question the priorities and values of mainstream society or acknowledge the barriers built and supported by limited views, which prevent students from living meaningful lives regardless of skill, motivation, or intellect (see Capper, 1993a).

Recommendations from the interpretivist paradigm. To avoid the dangers of the traditional paradigm, the interpretivist paradigm can provide some guidance. First, principals can consider collaborative and facilitative leadership styles as much as possible rather than deferring to a top-down approach. Second, principals can consider taking ownership of all the students

in their school, even if the organizational structure dictates that some students and personnel are under the supervision and evaluation responsibility of a district department, such as special education services. Third, as described at the beginning of this chapter, principals can consider curricular, instructional, and cultural changes within the school that could work in conjunction with student services to provide a network of support.

Fourth, for comprehensive student services to be successful, principals can consider the individual truths of students, their families, and their communities, with self-identified challenges and proposed solutions, rather than prematurely deferring to the experts of student services. Similarly, principals can consider student empowerment by avoiding the expert model in favor of a transdisciplinary approach. A transdisciplinary approach is one in which student services team members freely share their expertise with others, and in some cases, formally train others to carry out tasks the expert would traditionally do. For example, a guidance counselor could share one-to-one support counseling skills (not extensive therapy) with community or family members, or the associate principal.

Fifth, principals can also consider engaging in problem solving, long-term planning, and searching for positive alternatives, based on the unique strengths of each student, rather than labeling students and families, slotting them into existing programs and services, or relying on simplistic approaches. For example, the principal could also seek information from the student, and the student's peers and family, about their hopes and dreams for the student, positive adjectives to describe the student, and their worst nightmare about the student's future life such as having no friends and being lonely (see the McGill Action Planning Process [MAPS] for details of such a planning process, Vandercook & York, 1990).

Sixth, for comprehensive student services for empowerment, principals can consider placing a high priority on interpersonal relationships supported by sensitivity and caring, especially with reciprocal relationships among families and the community. To do this, principals can encourage all staff and students to be "boundary spanners" (Giroux, 1992) with one foot in the school and one foot in the community. Principals can engage in face-to-face, interpersonal, informal dialogue with others as much as possible, over other forms of communication to establish and maintain these relationships. Principals can also encourage the honest expression of feelings in decision making, and can establish a school culture where asking for help and support by students or staff, is viewed as a sign of maturity and health.

Finally, principals can also consider encouraging all students and staff to learn and to use conflict resolution and problem-solving skills, such as using "I" statements, expressing feelings and needs, establishing a plan, and following-up. Students (from prekindergarten through grade 12) and staff could also learn interpersonal skills, communication, and group processes.

and their relation to power and control, so as to provide webs of support for one another. In addition to these recommendations, the critical theory paradigm can help avoid the dangers of the interpretivist paradigm.

Critical Theory Paradigm: Comprehensive Student Services for Social Change

The critical theory paradigm's hallmark is its unyielding quest for social justice via social change. Critical theory embraces, in part, a concern for suffering and oppression, a critical view of education, leadership oriented toward empowerment and transformation, and an emphasis on morals and values. Principal leadership may include the deliberate involvement of disempowered students, families, and community members in discussion to identify problems, causes, and solutions based on personal experiences with inequity. In turn, this involvement may help students, families, and community members recognize, understand, and act against the objects of their oppression.

Its values. Principals whose paradigm preference is that of critical theory have a goal of social change for comprehensive student services. While not totally eschewing efficiency and effectiveness, or the importance of meaningful lives, these principals use student services, intertwined with the curriculum, instruction, and culture of the school, as a way not only to prepare students for meaningful lives, but also to provide them with the knowledge and skills to make a difference in their communities and society. One aspect of the principal's role in such an approach to student services is to elicit the input of the disenfranchised in all aspects of the school.

Its dangers. Dangers in using a critical theory approach accrue when the approach is used alone, without regard to the other paradigms. Principals relying on a critical theory approach could over-emphasize rationality and structure in student services and fail to appreciate and value the subjective human processes in decision making. For example, when making educational decisions about a student with special needs, principals may focus on individualized education plan components such as student deficits and psychological scores, rather than incorporating qualitative dimensions such as dreams and goals, suggested by the MAPS process described earlier.

Further, a critical theory perspective often relies on a consensus approach to conflict and decision making. While this approach has merit because of its inclusion of all perspectives in decision making and its departure from a win/lose majority voting to one in which negotiation and compromise achieve a solution agreeable to everyone, crucial points of disagreement could be dismissed in the rush to consensus, points that could be keys to deep change. Further, consensus can mask tension and create an illusion of community, neither of which is conducive to school renewal. Finally, principals could get excessively focused on social transformation such that student's immediate needs for services may not be met in an efficient and effective way.

Recommendations from the critical theory paradigm. To avoid the dangers of the critical theory paradigm, principals can rely on the strengths of the other two paradigms. Principals can consider the qualitative and human processes in decision making, as outlined in the MAPS process above, and in the suggestions in the section on the interpretivist paradigm. Principals can also consider the limitations of consensus decision making in student services, and be diligent about seeking the input of those traditionally under-represented in decisions.

In order to support a comprehensive student services for empowerment model from a critical theory perspective, principals can consider viewing all relationships and structures partially in terms of power and the ways they constrain or enable inequities among people. Principals can also encourage critical thinking about situations in terms of power relations. Staff and students can consider what makes sense and what doesn't in terms of leveling power inequities, otherwise these inequities will be reproduced. The critical theory paradigm can also inform the student services process by (a) defining the focus of comprehensive student services and (b) eliciting representation, both of which shape the principal's action of (c) providing accessibility.

First, in terms of defining the focus of comprehensive student services as leveling inequities, the focus needs to be on the student and their families and communities as the unit of voice and the school as the unit of change. Interagency communication is critical, but schools also need to communicate directly with communities and families, and really listen to their voices and perspectives. As one principal noted, "We [as principals] can no longer afford to whine and complain about the changes in demographics and family structure . . . we must accept these situations as reality." Principals will need to consider accepting the situations they cannot change and changing the things they can—the school and its response to social conditions.

Second, to elicit representation, principals need to consider a variety of perspectives from different power positions on student services teams. For example, principals can encourage the involvement of persons from the various levels in the school hierarchy such as teachers, students, and support staff. Further, principals can also invite persons from a variety of social status positions based on race, social class, gender, and other differences to participate on student service teams.

Third, principals also need to consider working toward redesigning district and school policies concerning the use of facilities to make the school building and its services as accessible as possible to students, families, and the community. To further increase accessibility, comprehensive student services could be anchored in the center (i.e., where people tend to congregate) of the neighborhood (e.g., existing building, church, or school).

Although well meaning, bureaucracies of any type may inadvertently limit accessibility to services. For example, the home-school liaison noted that a

vital service agency is located across a six-lane freeway from the neighborhood in a high-rise modern building, that is not on a bus line, and is protected by a sophisticated security system. This building and its location maintain agency control and serve the agency, not the neighborhood. Principals also need to consider transportation barriers, time barriers, barriers to classroom and building use, and the numerous forms families must complete for services, all of which limit accessibility to student services.

One school addressed the issue of accessibility by exploring ways to make school computers available in the evenings for students, parents, and community members, including the offering of technical college classes on computing at the school. In addition, the school provides two teachers to tutor after school twice a week in the neighborhood center. These teachers of color, working in a predominantly minority neighborhood, are highly esteemed in the eyes of students and families. Students know the teachers have easy access to their families, which significantly quells problem behavior. More importantly, the teachers can create a curriculum and an instructional process that are immediately relevant to the students.

In sum, the values of each of the paradigms, when taken together, can alleviate some of their individual dangers. Principals can take the values of each of the paradigms, informed by the social justice dimension of critical theory, and mold them into a comprehensive student services for empowerment perspective. However, even if principals embrace these values and engage in these actions to promote comprehensive student services for empowerment, such as found in the Community Crossroads project, they may encounter many barriers.

Challenges for Principals and Comprehensive Student Services

Barriers for principals who wish to pursue comprehensive student services for empowerment include (a) agency structures and cultures, (b) limitations of professional training, and (c) increased costs.

Agency Structures and Cultures

Agency structures and cultures that can impede comprehensive student services for empowerment include (a) competition, power struggles, control, and blame; (b) obstructive informal agency goals; (c) administrator resistance; (d) intra-agency tension; and (e) role conflict and ambiguity. First, competition, power struggles, control, and blame, permeate within and among many schools and service agencies, at the personal, group, and systems levels. Clients then get caught inbetween this dysfunctional behavior and value system. Student services in schools also are at risk of functioning in this manner. For example, truancy is often addressed via control and law

enforcement. Special education team meetings often result in student labeling and scapegoating the student rather than addressing how the school contributes to the problem. Competition, power struggles, control, and blame also discourage creativity and risk taking. Workers want to appease the bureaucracy, and the status quo is maintained because people do not want to risk losing their jobs for challenging the status quo. At the interagency level, because of the culture of control, persons on comprehensive service teams may struggle with the degree of power they have over themselves and over the agency with whom they're employed. Team members may struggle when individual work needs, such as limiting time in the community, may conflict with group needs of addressing community concerns in a timely way.

Agencies also have a tendency to blame one another for the foibles and inequities of society. Schools are no exception to this competition and blaming. Schools within districts often are in competition with each other for resources, rather than engaged in a spirit of collaboration. Within the district, middle school educators may tend to blame the elementary school educators, and the high school staff blame the middle school staff for student failure or limitations.

Informal, unwritten agency goals are a second aspect of agency structure and culture that can obstruct the development of a comprehensive student services program. Often, the unwritten, informal goal of all agencies, including schools, is a viable, clean, solid, well-funded agency—that is, self-maintenance. Interagency collaboration is often viewed by agency administrators as a way to expand their own funding base, rather than as a means for empowerment. For example, agencies may buy into the team concept located within the schools because they see it as a way to expand their client base and funding, by being located in the schools. In this model, agencies could all have their own niche in the school, and maintain their separate identity, rather than deconstruct and reconstruct a new model aimed toward empowerment.

Agency administrators may also be resistant to changes in work hours and worker location that may require time in the community—a third way agency structure and culture can impede student services. Agency administrators may expect community workers to work their regular shift in addition to the time in the community. These role changes of agency workers from the office to the community may, in turn, create tension with those within the agency. The agency-based workers may resent workers who spend time in the community and who receive a reduced caseload to compensate for community time.

Unstructured time in the community may create intra-agency tension from role conflict and role ambiguity for community workers—a fourth agency structure and culture challenge to student services. For example, if a worker has work to do at the office, or if a public health nurse has four other neighborhoods besides the target neighborhood, and the worker is required to spend all day being present in one neighborhood, stress may build within the worker for failing to complete traditional work tasks.

Finally, agencies are generally not designed for holistic approaches to services. Human service workers are often assigned the case of one person, not the person's entire family. If workers gather information and provide support for the whole family, the legal system often disregards family information and needs and focuses only on the person in the family who was the impetus behind the need for social services.

Professional Training

In addition to barriers of agency structure and culture, a second barrier to comprehensive student services is professional training. Professional training indoctrinates people to take a narrow perspective of services and what makes sense, and to believe in the focus and philosophies of agencies without question. Training programs must consider the differing paradigm perspectives in their preparation programs, and be grounded in a critical view of change and transformation.

Costs

Third, contrary to what planners may hope, initial costs may increase rather than decrease or remain the same with consolidation of services. These increased costs may be due not only to initial start-up costs, but more significantly because a comprehensive student services model such as Community Crossroads, if it is successful, increases access to services for those in need. Ease of access will likely mean more use of services, thus increasing costs. If prevention is the focus, however, principals and other agency planners can consider the long-term costs and benefits of this service model. Future personal, agency, and societal costs can be significantly diminished and benefits significantly enhanced with preventative processes and programs. Similar to arguments for early childhood education, principals can gather statistics that demonstrate the long-term costs and benefits of comprehensive student services and appeal, in collaboration with other service providers, the coordination of funding mechanisms to the benefit of coordinated services.

Given that principals engage in values and actions supportive of comprehensive student services geared for empowerment, how can principal preparation programs support this role?

Recommendations for Principal Preparation for Comprehensive Student Services for Empowerment

The preparation of principals for comprehensive student services aimed for empowerment should include components that traditionally are not included in preparation programs. Currently, study of the organization and administration of student services is often not a requirement in administrator preparation, and

if so, is relegated to those preparing to be central office administrators in special education and pupil services. Current programs often emphasize technical and professional survival skills, rather than ways to surmount the status quo.

Like principals, faculty in preparation programs should consider confronting societal realities head on, and consider the ethical responsibility of preparing administrators in roles as social change agents. To address changes needed in preparation of principals, faculty themselves should consider being actively engaged with local school programs in their teaching, research, and service. Faculty should also consider tooling up on alternative paradigms of management and leadership, as well as nontraditional instructional processes, as models for the people they are preparing.

At a minimum, the preparation of principals for comprehensive student services aimed for empowerment should include students engaged in (a) examining the purpose of schooling and associated multiple paradigm and epistemological perspectives; (b) examining their own personal philosophies in relation to the suggested values and actions previously described; (c) experiencing opportunities to interact with support service people; (d) spending time in a number of different schools for practical experience to find what works and what doesn't; (e) acquiring counseling skills and alternatives to suspensions and punitive approaches in working with students; (f) acquiring skills in surveying the community, including demographics and needs, and creating and coordinating a curriculum to be community responsive; (g) acquiring up-to-date legal knowledge in related areas such as confidentiality; (h) acquiring expertise in working with families on a personal level; and (i) acquiring knowledge, skills, and attitudes related to caring and sensitivity.

Even though barriers exist for principals committed to comprehensive student services for empowerment, these values and actions can go a long way toward meeting and surmounting these barriers. The lives and future of all students, their families, the community, and the future of our society are not only worth it, but depending on it.

Endnote

1. In my role as assistant professor in educational administration at the University of Wisconsin-Madison, I teach courses in administration of special education, administration of pupil services, and administration of programs for at-risk students. With a strong background in special education and at-risk students, I spent 5 years as an administrator of special programs in the Appalachian region of southeastern Kentucky. In this chapter, I seek to link my theoretical writing in critical theories (Capper, 1992) with the voices of principals, and to make practical recommendations for practice and preparation.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Burrell, G., & Morgan, G. (1979). *Sociological paradigms and organizational analysis*. London: Heinemann.

Capper, C. A. (1992). A feminist poststructural analysis of nontraditional approaches in educational administration. *Educational Administration Quarterly, 28*(1), 103-124. EJ 441086

Capper, C. A. (1993a). Administrator practice and preparation for social reconstructionist schooling. In C. A. Capper (Ed.), *Educational administration in a pluralistic society*. Albany, NY: State University of New York Press.

Capper, C. A. (1993b). Educational administration in a pluralistic society: A multiple paradigm approach. In C. A. Capper (Ed.), *Educational administration in a pluralistic society*. Albany, NY: State University of New York Press.

Giroux, H. A. (Ed). (1992). *Postmodernism, feminism, and cultural politics: Redrawing educational boundaries*. Albany, NY: State University of New York Press.

Greenfield, T. B. (1984). Theories of educational organization: A critical perspective. *International Encyclopedia of Education: Research and Studies*. Oxford: Pergamon Press.

Sirotnik, K. A., & Oakes, J. (Eds). (1986). *Critical perspectives on the organization and improvement of schooling*. Boston: Kluwer-Nijhoff Publishing.

Vandercook, T., & York, J. (1990). A team approach to program development and support. In S. Stainback & W. Stainback (Eds.), *Support networks for inclusive schooling: Interdependent integrated education*. Baltimore, MD: Brookes Publishing.

XII

A Social Work Perspective on Comprehensive Children's Services

Sally G. Goren
Lourdes B. Afable

Early in this century, educators recognized that schooling needed to be provided in tandem with other services (Costin, 1977). The problems of the community as well as the climate within a school may interfere with the best efforts of the educator to teach and of pupils to learn. The circumstances the children experience in their lives during the 18 hours they spend each day away from the classroom will affect the attitude and effort a child may be able to put forth while in class. Issues of acceptance, support, trust, friendship, self-esteem, stimulation, and soothing are all salient to the atmosphere in which optimum learning may occur. Social workers in collaboration with the teachers can help shape new successful methods of dealing with children where the singular effort of either professional will not suffice for the task. This chapter offers guidelines for collaboration with a number of target service populations in the school to help all the participants in the education of children. The shared goal of the school, the successful preparation of the students for the world of work and social responsibility, can best be met through this joint effort (Hare, 1991).

Social Work Principles in School Social Work Practice

There are philosophical and theoretical variations between the education of teachers and social workers. The social worker has extensive knowledge of developmental processes across age groups, including normal and pathological adaptations. The social worker possesses a significant understanding of the impact of culture, ethnicity, religion, and socioeconomic status on children's behavior in and out of school. The social worker is knowledgeable about human services organizations, their history and policies and how they may best be accessed for the benefit of students and their families. Family dynamics

and their relationship to the child's in-school behavior is often a factor in academic failure and it is in this area that the social worker's professional education adds another dimension of understanding that may be useful to the teacher. As the link between school, home, and community, the social worker can help identify those circumstances that may be primary interferences in the educational process (Monkman, 1991). In view of this ecological perspective, the school social worker becomes a conduit for information and an agent for change with all components of the multiple systems within which the school-age child lives (Germain, 1991).

Social workers originally entered the school system via community agencies external to the school. Truancy, delinquency, child labor, poverty, and dependency were regarded as impediments to the acquisition of an education and social workers collaborated with school officials to address these problems. As social workers became employees of the schools themselves, the definition and scope of their role altered and different expectations of service emerged. The status of the social worker within the school was designed by school administrators and boards of education and placed social workers on their perennial edge of being in and removed from the system at the same time.

While the primary thrust of all services to children in schools must be directed in support of their learning, the social worker is exempted from actual teaching responsibility. Their education, as described above and expanded upon later in this chapter, does not include teaching skills, classroom discipline techniques, curriculum development, or other teacher-owned talents. Other support or resource personnel such as psychologists, speech therapists, physical or occupational therapists, and nurses all share the unique position of the social worker and acknowledge the tension of adapting their professional expertise to the expectations and needs of the educational system. Each adds their unique knowledge to the compendium of services a given child might require.

While the social worker may have significant data relating to a child's environment, she or he also must abide by her/his professional ethical principles regarding confidentiality, as well as state and federal laws that limit or prohibit sharing of information regarding some significant aspects of the family's conditions. Legal prohibitions are particularly restrictive regarding substance abuse and previous criminal charges (Saltzman, 1986).

In addition, the social worker must evaluate all the material that is discovered or that is shared to determine its relevance to the educational experience of the child. Teachers may be frustrated if they feel they are not being told the entire story. As a premier ethic of social work practice, confidentiality of client information is carefully protected by the practitioner and any tensions that may be experienced between teacher and social worker must be addressed. The social worker can share why they withhold certain data or details while the teacher may present a rationale for the information to be

exchanged. The concern that tantalizing private information may be indiscreetly spread, and sometimes distorted, through school personnel and therefore more seriously damage a child and/or his/her family, causes many social workers to be extremely protective of their information. While Family Educational Rights and Privacy Act (FERPA) regulations provide parental and pupil access to school records, the social worker must determine what information to include in the official files that is of relevance to the educational program of the youngster. Stringent legal constraints create a liability risk for social workers who discuss inappropriate material with a teacher or administrator. On the other hand, there are certain cases, such as suspected child abuse, which compel teachers and social workers to report these suspicions to the legally constituted agencies charged with investigating reports of this nature. The principle that guides social work practice and that is shared by education must be the maintenance of confidentiality in all instances except when the child is in physical danger of harm (self or other inflicted) or is in danger of harming another.

Another significant area of social work education is the exposure to cultural, social, racial, and ethnic diversity. Every social work graduate program requires evidence of this focus in both course material and in field practice. This provides the social worker with an intimate opportunity to appreciate and value the strengths and coping skills of many groups. As the melting pot concept has given way to the stew in which all components retain their unique flavors, acculturation with maintenance of a group's singular characteristics is regarded as the norm. There is a nationwide move afoot in colleges and universities to include, as required courses, material that will expand a student's understanding of various cultures, their histories, values, and mores. Until this becomes the standard, the social worker's special knowledge in this area will increase and enhance the teacher's understanding of the pupils in the classroom. If a teacher has not had such course material, the social worker is the primary resource within the school who can expand the teacher's cognizance of diversity, work with the teacher to include culturally relevant material, adapt current curriculum to be more representative of the school's population, and/or invite knowledgeable persons to offer in-service training or present appropriate cultural information. In many schools experiencing the integration of culturally diverse children, social workers have spearheaded all-day programs that provide a forum for the children and their families to share customs, food, and show off native costumes and dances. This encourages respect for differences among both staff and students and easily becomes a part of social studies curricula.

Social Worker's Target Population

According to state guidelines, a school social worker carries responsibility for providing necessary social work service to all the pupils in a district, whether they are in mainstream classes or receive special education services. In practice, it is usually the latter group, for whom social work services are mandated, originally by PL 94-142 and then extended by the Individuals with Disabilities Education Act (IDEA), who may receive the greatest percentage of attention. The responsibility for service extends to the families of the children when it is identified that home issues are a significant factor in the child's inability to fully utilize the educational opportunity. As schools have had to become more multiservice and as the needs of children, especially in urban areas, have grown exponentially, the school social worker has been compelled to consider a more community-based practice. Other resource staff in schools in concert with social workers, are developing programs to deal with the multiplicity of issues confronting school-aged children. The following sections will identify the target populations and offer suggestions regarding the teacher/social worker/support service collaboration to meet their varied needs.

Mainstream Children

Many of the problems presented by the average child are developmentally related. While the old adage, "they will outgrow it" has accuracy, the teacher who is dealing with a group of weepy 5th-grade girls who have been abandoned by their best friends or who are excluded from some activities by their classmates will need immediate help. The teacher who is experiencing difficulty in handling a particularly rambunctious cohort of 2nd-grade boys can't wait for 3rd-grade maturation to calm them down if she is to teach them subtraction and writing. It is appropriate to tap the social worker who may be able to conduct some classroom groups with the teacher, or who may establish a few time-limited, pull-out groups to tackle these concerns.

Oftentimes, community factors such as crime, drugs, unemployment, and inadequate housing will be regarded as the culprit interfering with the capacity of the normal child to concentrate in school. Attention to the impact of the environment on the school's mission is now engaging school personnel in venues where they may have little familiarity. Social workers are now returning to the neighborhood to reach out to families, and institute prevention programs in an effort to reduce the toxicity of poverty, ignorance, and hopelessness that affect large groups of people who are excluded from access to the mainstream. While the social worker cannot single-handedly solve societal system issues, his/her awareness of them coupled with skill in developing problem-solving abilities in children and adults, may remove some barriers. Social workers, trained in assessing within an ecological model, will

include a community perspective in their interventive efforts. Some mainstream children will be dealing with family disruption or dysfunction caused by joblessness, divorce or death, recent moves, addition of a new sibling, or substance abuse. The family issues may range from temporary situational to multigenerational problems. The teacher will usually be the first person who will notice changes in a child's behavior and will be alerted to the possibility of a home-based problem presenting itself in a child's inattentiveness, hyperactivity, or sadness. The teacher appropriately refers to the social worker to further explore these symptoms.

Parent Involvement

Educators continue to express frustration with low parent involvement in the schools. Studies of parental involvement in regular and special education programs noted that educators and other school personnel have failed to consider parents as partners and critical decision makers in educational programming (Lipsky, 1985; Turnbull & Turnbull, 1982).

Researchers further noted that parents relied on the expertise of teachers but expressed dissatisfaction with the approaches of schools in soliciting their participation. Sometimes educators failed to recognize their efforts in meeting life's tremendous pressures and need for assistance in coping. School social workers could facilitate strategies in meeting unique family requests for help and strengthen the teachers' and parents' goal to develop a consensus in addressing the student's educational needs.

The school social workers could also assist the teachers in securing information from parents about barriers to parental involvement and what specific mode of participation would be comfortable for them. For example, some parents would have the most satisfaction from parent-teacher conferences, while others prefer serving as tutors or library assistants. Together, the teacher and the school social worker could effect parental group discussions on how to improve the school climate. Thus, the school social worker could assist the teachers in integrating in the educational process a conscious effort to determine effective parent participation practices and listen/act upon parents' viewpoints rather than those exclusively of professionals or other policymakers (Turnbull & Turnbull, 1982).

Children with Disabilities

Following the passage of PL 94-142 in 1975, and later PL 99-457 and PL 101-476 (IDEA), the role of the social worker in assessing and serving the needs of children requiring special education services was codified in both federal and state mandates (Tiefenthal, Moorman, & Morrison, 1991). Wherever indicated, the social worker must provide the service as written in the Individualized Educational Plan (IEP) for the particular child. These services are often expressed in terms of desired behavioral or academic

changes that will occur as a result of individual or group counseling. Referral of the family for services may also be a component. Subsequent public laws have expanded the original charge, increasing the age range and detailing service components that must be provided.

Some children with disabling conditions will require self-contained classrooms designed to meet their special needs. Other children will be served by resource teachers who will meet with the child outside of the regular classroom for a given number of minutes per week to attempt to bring the child's academic work up to grade-level standards. At the present time, there is a strong movement designed to return many pupils with disabilities into a more mainstream educational program. These thrusts in educational programming have brought about intense anxiety and discomfort among educators both in regular or special education programs. Specifically, teachers in regular education anticipate complete chaos and disruptions in conducting classes with students who are disabled. Special education teachers cling to a rather protective attitude towards their pupils and feel that both the regular education teacher and the mainstream children will not be able to accept the challenges presented by the students with disabilities.

In addressing this issue, the school social worker could organize activities on transitional programming that highlight understanding of disabling conditions, defining roles of all participants; implement peer group discussions; and engage teachers in structured discussions of curriculum modifications, problem solving, and referral to resources for support and enrichment. In many schools, the social worker serves as the case manager for a large number of students and has proved effective in coordinating activities toward successful mainstreaming and inclusion.

The Collaboration Process

In the preceding pages, we have described the populations for whom the school social worker usually has responsibility. How the social worker, teacher, and other pupil services personnel can best address their responsibilities is of great importance in a collaborative relationship. Each of the resource staff in a school district carries responsibility for specific components of the case study, which is the basis for determination of eligibility for special education placement or services. The educational background and professional experience indicate variations in attention to the child's problems, which are then melded together into an assessment of the whole child, which leads to the IEP should the multidisciplinary conference indicate eligibility. The team may include the psychologist who administers intelligence and projective tests to indicate whether there is retardation or serious psychological pathology. Speech and hearing experts determine the degree to which such impediments might be

interfering with the child's school progress. The nurse adds significant medical history and/or current physical concerns. The counselor comments on the academic and social status of the student. The social worker provides a comprehensive social history that has been developed from interviews with the parents, observation of the child, interviews with the child, results of the administration of an adaptive behavior instrument, and consultation with the teacher(s). Depending on the needs of the child, any of the resource staff identified above and the special education teachers would be given remediation assignments designed to enhance the child's opportunity to learn in school. There are some overlapping areas in which psychologists, social workers, and counselors would need to determine which person would be the most appropriate for the child. This might be decided by prior relationship with a child or family, time availability, or expertise with a particular problem (Radin & Welsh, 1984).

Community Collaboration

School boards and administrators have had to acknowledge the limitations within the walls of the school building to provide education and socialization for children. In numerous cities, schools have identified the various social ills that prohibit children's achievements and have developed school/community programs designed to reach out to the community to stimulate active collaboration with the school. The complexity of these programs presents a challenge to all potential participants. What the school administrators think would be useful may not be the major concern of the families of the children. What the teachers would find supportive may not be within the scope of neighborhood agencies. What the businesses would like to contribute may not be what the school's constituency deems important. Yet, within each collaborative interaction, lies the opportunity for a positive change.

As in any team effort, the players must know what are the talents of the others. They must be free to identify need; accept assistance; refuse inappropriate help; and negotiate and resolve differences that exist because professional views are disparate, cultural understanding is limited and, very significantly, territorial boundaries may be challenged. When teams are comprised of school personnel professionals (including teachers, counselors, nurse, psychologist, social worker) as well as indigenous, nonprofessional neighborhood workers, interested families, and representatives from social and health care agencies, there is much opportunity for misunderstanding, disrespect, and failure. However, there exists an even greater opportunity for the development of programs that are genuinely responsive to school and community needs. Multidisciplinary collaboration is regarded as the most effective way to address the multiproblems presented in an urban environment. Communication based on respect, focus on the desired outcome of improved educational opportunity, and blurring of territorial imperatives provide pathways to success.

The social worker, who is in the unique position of knowing both the school and neighborhood, can be a major facilitator in coordinating the services. Social workers have training in group process as well as individual assessment of need and can be effective managers of interdisciplinary services. They may need to function in an administrative role such as team leader at special education staff meetings with the sanction of the principal or superintendent, in order to insure that multiple tasks or assignments are completed. Clearly, administrative approval is necessary for any effective work to begin.

If there is the expectation that the social worker will continue to be responsible for all the usual tasks as has been described, as well as new areas of intervention and responsibility, considerable tension may develop between the social worker and other school personnel. Unless there is another worker available to complete mandated functions, the school social worker would have to be a master juggler to balance direct service requirements with the management of a team effort. The same would be true for all the other staff who have their usual responsibilities to discharge while trying to develop creative ways to address the problems that confront children and families. The time necessary to remediate and, more importantly, to prevent, is usually not available to professional staff in today's schools. Given all the reasons why such programs may not succeed, there are compelling reasons to move forward in small or large efforts to engage a wide range of individuals to change the path to school (and life) failure for so many children.

Consultation

A major role for social workers in schools today is that of consultant. Usually this role occurs with the teacher, though the social worker may be consultative to the principal and to pupil personnel staff as well. At whatever point and in response to whatever behavior (or absence of desirable behavior) a teacher has determined the child cannot be served exclusively by her/him, a referral must be made. It is most efficient if it is done in writing, using a brief referral form that the social worker, administrator, and teacher representatives have developed. The referral form should include concise identifying information, a statement of the problem(s)/symptom(s), or a checklist that enables the teacher to pinpoint the areas of concern and outline priorities. Another section of the form should include space for the teacher to indicate what methods already have been used to address the concerns. This, too, could be a checklist. The purpose of the referral is to provide:

- Important information,
- Specification of the problem,
- Identification of the point at which the consultation is needed, and
- Accountability for both teacher and social worker.

The last item is of particular importance in guaranteeing that the service or intervention has had an effect, that all appropriate feedback occurs, that all the significant personnel are apprised of the progress of a treatment plan, whether this is a referral for community resources or for counseling sessions or a classroom intervention. The report of process or progress may also be made using a printed form, checklist, or computerized program to maintain records as is the case in many school districts.

There is no substitute for the direct conference to develop compatible working relationships between teacher and social worker that will enable future referrals to be handled in an atmosphere of mutual trust. The teacher's concerns can be most effectively dealt with when she or he can freely share and inform the social worker and have an opportunity to engage in an open exchange of ideas. There need to be on-going meetings, however brief, as long as the social worker is involved with the child and/or the teacher considers the social worker's input of value. This will also become the forum for evaluation of interventions and change. The school's administration must value and support this practice by providing time for both social worker and teacher to have these exchanges. In most instances, change will be identified in behavioral terms, either in the classroom or in relation to academic performance.

Another area to consider in dealing with the problems of the child is identifying who will take the lead in communicating with the parent regarding any problems the child is exhibiting. This is to be evaluated according to the problem, the teacher's comfort in dealing with the parent, and the specific areas that may require further follow up. In some circumstances, it may be best dealt with by the teacher, in others, by the social worker. The principal or other support personnel may be appropriate informants. Some issues might require the presence of more than one person to help a parent understand the ramifications of the recommendations. As in any intervention, mutual planning and agreement is most critical. While there will be instances where consensus will not be reached, there is the need to try to find common ground and develop a plan that has the potential for success. Again, trust and good will go a great distance in maintaining a relationship that will provide maximum service to the child in school.

Classroom Management

The previous section described the initial and on-going consultation process whereby the teacher and social worker may bring their respective talents to the planning of necessary interventions for the child in need of service. One of the realms where the joint thinking can be most effective is in classroom management. When certain problems appear to be common for groups of children in a room or when the teacher is grappling with a few pupils who are disruptive to the entire student body, the social worker's input may prove particularly useful.

The process for ascertaining how some intercessions might be developed will depend on a free exchange of information revealing his/her concerns on the part of the teacher and an opportunity for both teacher and social worker to consider a variety of potential solutions. Often the social worker will need to observe the classroom in action to make a better assessment of the various factors that may be significant. This can include observation of the children's behavior as well as the performance of the teacher in response to the children. Following this, both would brainstorm a number of ideas that might address the observed problems. They would select one that seems most effective and determine how the intervention should be introduced. The plan might indicate that it would be best handled by the teacher alone or it might be useful for the social worker to enter the classroom with a curriculum designed to work with a given issue. There might be the indication for another resource, such as an administrator or a community person to come to the class. In many circumstances, it is the joint management by both teacher and social worker in the classroom that is most effective. The methods used by the social worker will provide a template for the teacher to use as she or he finds it effective. The social worker will gain an appreciation of the teacher's classroom skills and the challenges presented by a larger group of children, some of whom may exhibit serious behavioral or academic issues. Together they can bring their respective talents to bear and therefore provide a higher level of service to those for whom they are responsible.

> A 5th grade teacher was becoming increasingly troubled by the classroom rumpus resulting from a boy who mercilessly bullied a number of other children who were vulnerable to his attacks. His provocation was unpredictable and often covert, though the consequences were apparent and disruptive. The initial attempt by the social worker to discuss with the family their son's behavior and to suggest he might benefit from counseling was met with disdain. The family refused to consider any treatment for their son. The teacher and social worker considered that they needed to develop an alternative and together prepared a curriculum for affective education. Specifically, they focused on assertiveness and group support by the class in the face of this child's attacks and the social worker and teacher jointly engaged in a number of exercises with the class over a period of a few weeks. The children acquired new skills that helped deal with the class bully, and provided them with problem-solving tools they will have all their lives. The bullying diminished because the responses to the behavior changed and the teacher and pupils experienced a calmer climate in which her teaching skills could be effective.

The vignette offers a glimpse of the kind of classroom collaboration that can change behaviors, attitudes, develop skills, and make learning possible.

Staff Development

Educators need information and knowledge about nonacademic, psychosocial subjects. Teachers continue to express a need for varied in-service programs covering child neglect/sexual abuse, suicide, gang prevention programs, effects of separation or divorce on children and parents, AIDS, needs of homeless children, alcohol and drug abuse, how students and teachers deal with stress, principles of privacy and confidentiality, and a myriad of other topics. The school social worker could serve as the presenter or a participant with other school social workers, psychologists, or nurses. The school social worker's ability to conduct need assessments, to prioritize, and to collaborate with internal and external (community) staff and resources is a stated function of the profession. She or he will be guided by the degree of the teachers' expressed need, the gaps in information, and the school's mission.

Community Referrals

It is the social worker who has knowledge of a large variety of community resources that may be required to enhance a child's capacity to learn. The social worker knows how to help children and families obtain the services they need and can also initiate action to create resources where none exist. Though much of what families require lies outside of the school, the families' capacity to obtain a variety of services will enhance the potential for each child to utilize the educational opportunity to the maximum.

If there is an academic problem, the social worker will be able to make referrals for tutoring or appliances (glasses, hearing aids). If enrichment is indicated, the social worker should have knowledge of programs for the gifted, of colleges or universities that have specialized programs in specific subject areas for the talented, above-average elementary or high school pupil. The social worker may know of funding sources for the services that the child must have. Where family dysfunction appears to be the major interference in a child's acquisition of an education, the social worker will be able to make referrals to family service agencies, to drug rehabilitation programs, or to child protective services. Should it be necessary, the social worker can engage the police on behalf of a child or family. A family may benefit from a referral to a hospital or clinic for psychiatric outpatient service or a support group to help them cope with illness, divorce, and a myriad number of other ills that befall them. Again, it is the social worker who should have knowledge of the resource and the means to reach them. The teacher may also know about many potential resources and can work with the social worker to help a child or family have their needs met. It is incumbent on the teacher to identify when

a child is exhibiting a problem that interferes with the educational process. It is the social worker together with the teacher who will assess and identify the needs and facilitate an appropriate referral. Sometimes it may require more than one meeting with a family or more than one call to an agency for a referral to be effectuated. In those instances, the teacher and social worker must maintain clear lines of communication to avoid feelings of frustration and irritation that the job isn't being done. Alternative, temporary measures may need to be instituted until the referral is complete. Joint planning and responsibility will direct the best outcome.

Not all of the pupil's problems will be of an immediately serious nature but it will be recognized by a teacher that a child is not working up to their intellectual potential or that the child has a particular talent that should be developed. They may be latchkey children who would benefit from after-school recreation programs or an opportunity to become proficient in a sport or with a musical instrument. The social worker would be knowledgeable about community youth service bureaus, local park district, YMCA and YWCA programs, settlement houses, and other community centers where such programs are available. In some cases, a child may require medical attention that the parent has not recognized or cannot afford to obtain. There are various health services to which the family may be referred. Either the school nurse or the social worker could facilitate such referrals. Sometimes scholarships from foundations, local businesses, and government programs will enable a child to participate in enrichment activities. All of the resources and services noted above should be known to the school social worker and that person should be regarded as the primary individual in the school who would help teachers and pupils find what they need in the community.

In classes for older youths with disabling conditions, the social worker must work in close collaboration with the teacher to plan for vocational training, appropriate post-high school education, or other specialized services required by the child. Counseling with families is particularly important at this time. When the teacher and the social worker can jointly meet with the parents, they can together present an accurate evaluation of the child's strengths and limitations and indicate avenues the parents can pursue to enhance their child's further development. The simultaneous interview prevents distortion of the data and avoids dissension between the professionals. It is evident that the best service to a child is service based on shared expertise that promotes maximum use of the educational opportunity.

Conclusions

For teachers to obtain the greatest opportunity to demonstrate their teaching skills, teachers need to recognize when services of support personnel should be activated. All the members of the team share the education of the child as a primary goal. Knowing the areas of expertise of the nonteaching personnel will direct teachers to invite their participation when various impediments to learning emerge. This chapter has identified some arenas in which the school social worker can be most effective for reaching the educational goal. It is incumbent upon both teachers and social workers to understand and respect each other's expertise and to formulate how this knowledge may be integrated to provide for children's needs. Communication and collaboration are the essential ingredients.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Costin, L. B. (1977). School social work. In *Encyclopedia of social work*, 17th ed., vol. 2 (pp. 1239-1240). Washington, DC: National Association of Social Work.

Germain, C. B. (1991) An ecological perspective on social work in the schools. In R. Constable, J. Flynn, & S. McDonald (Eds.), *School social work: Practice and research perspectives*, 2nd ed. (pp. 17-29). Chicago: Lyceum Books, Inc.

Hare, I. (1991). School social work and its social environment. In R. Constable, J. Flynn, & S. McDonald (Eds.), *School social work: Practice and research perspectives*, 2nd ed. (pp. 71-86). Chicago: Lyceum Books, Inc.

Lipsky, D. K. (1985). A parental perspective on stress and coping. *American Journal of Orthopsychiatry, 55*(4), 614-617.

Monkman, M. McQ. (1991). The characteristic focus of the social worker in the public schools. In R. Constable, J. Flynn, & S. McDonald (Eds.), *School social work: Practice and research perspectives*, 2nd ed. (pp. 30-49). Chicago: Lyceum Books, Inc.

Radin, N., & Welsh, B. L. (1984, January-February). Social work, psychology and counseling in the schools. *Social Work, 29*(1), 28-33. EJ 299200

Saltzman, A. (1986, November-December). Reporting child abusers and protecting substance abusers. *Social Work, 31*(6), 474-476.

Tiefenthal, Moorman, & Morrison. (1991). Educational mandates for handicapped children and school social work. In R. Constable, J. Flynn, & S. McDonald (Eds.), *School social work: Practice and research perspectives*, 2nd ed. (pp. 115-124). Chicago: Lyceum Books, Inc.

Turnbull, M. A., & Turnbull, H. R., III. (1982). Parent involvement in the education of handicapped children: A critique. *Mental Retardation, 20*(3), 120-121.

Winters, W. G., & Easton, F. (1983). *The practice of social work in schools.* New York: Free Press.

XIII

A Primary Health Care Perspective on Comprehensive Children's Services

Shirley A. Girouard
Judith B. Igoe

Definition and Characteristics of Primary Health Care for Children and Youth

Primary health care is widely defined as the delivery of first contact or point-of-entry health services to individuals of all ages in readily accessible facilities, including work sites and some schools. This type of care is often referred to as one-stop shopping because the diagnosis and treatment of a health problem is possible within the same facility and a wide range of basic services like well child care and immunizations are available. The defining characteristics for primary health care are that it is (a) comprehensive, (b) family centered, (c) coordinated, and (d) continuous in the sense that a central primary health care provider assists the family in dealing with a variety of health problems over time. Nurse practitioners and physician assistants, as well as physicians, provide these preventive and curative health services. Health promotion and active consumer participation are important additional features of primary health care.

Dysfunctional family living, poverty, violence, and academic failure have such a detrimental and conjunctive effect on a student's well-being and ability to function that primary health care by itself offers only a partial solution to these problems. Consequently, the challenge today is the integration of primary health care services with social services, education, and other community services into a comprehensive children's service program that enables students to develop the protective factors they need to grow and function normally. Fortunately, this integrative process is already under way in a number of communities. School health councils with representatives from the school and the community have convened in many areas as a coordinating group to pull together a variety of health services and health promotion efforts.

More primary health care is now offered at or near schools; and these services are being affiliated with other educational, social, and counseling activities. Increasingly, the school nurse serves as a case manager and link between the school system and the community health center, hospital outpatient department, or private practitioner's office, when health services are provided outside and away from school.

In all settings and under any circumstances, primary health care services should include (a) the early on-site diagnosis and treatment of common illness, (b) screening and referral for more complex physical and emotional disorders requiring specialized diagnostic and therapeutic measures, (c) the education and preparation of consumers to become their own case managers, (d) the monitoring of stable chronic disease like asthma, the health condition most frequently responsible for school absence, (e) psychological services that include on-site treatment as well as diagnosis of emotional disturbances, and (f) health counseling about personal health practices and healthy life-style behaviors. Physical or occupational therapy, speech therapy, audiology services, nutrition services, dental care, and reproductive services including birth control, may also be available to augment other services. Specific types of primary health care services for children and youth that are now available in the community and in some schools are presented in Table 1.

Table 1
Primary Health Care Services for School-Age Youth

- Sensory screening for vision and hearing
- Speech and language evaluations
- Developmental screening
- Orthopedic screening for scoliosis
- Immunizations
- Health risk appraisals
- Complete physical examination, health history, and simple laboratory procedures for preventive health purposes
- Partial physical examination, health history, and minor treatment and referral (if necessary) for acute illness and injuries
- First aid, emergency care, and treatment with referral as needed
- Prenatal care
- Individualized comprehensive care for students with special health needs
- Health maintenance care for students with chronic illness
- Substance abuse detection and treatment
- Diagnosis and treatment for sexually transmitted diseases
- Mental health evaluations and counseling services

The Need for Primary Health Care as a Component of Comprehensive Children's Services

For children, health and well-being are fundamental to normal functioning. Well-documented studies conclusively demonstrate the relationship between a child's health and that child's ability to perform in school (Klerman, 1988; National Health/Education Consortium, 1992b). Educational parity is dependent, at least in part, on health care parity, and the nation's disadvantaged children are increasingly suffering from a lack of health care. Poor children are twice as likely as more affluent children to have health or mental health problems that impair their daily functioning (Starfield, 1982). Nearly 20% of the nation's children live in a family with an income below the poverty level and many of these 12.6 million children are without basic health care services, jeopardizing their health, and in turn jeopardizing their prospects for educational advancement.

Multiple health factors challenge children's educational functioning. Some of these factors, as mentioned above, result from poverty, others result from social problems related to the new morbidities of our rapidly changing society. Whatever the cause, poor health results in poor educational performance. For example, in recent years 7% of all births have resulted in low birth weight babies, who are at greater risk for long-term developmental problems and learning disabilities than babies with an appropriate birth weight (Ramey & Ramey, 1992b). Although early and adequate prenatal care could greatly diminish the problem of low birth weight and learning difficulties, nearly a quarter of pregnant women fail to receive such care (National Health/ Education Consortium, 1992b).

In 1989, 2.2 million children were reported abused or neglected, a 147% increase over the figures for 1979. In a recent survey, 34.7% of youth admitted to having five or more drinks in the previous 2 weeks. More than half of all adolescents between the ages of 15 and 19 are now sexually active, exposing them to sexually transmitted disease as well as unwanted pregnancy and the difficulties of parenthood. Of the 7 to 10 million children and teens who have emotional problems, only 2 million of them are receiving any help, and the suicide rate for teens is epidemic. Even preventable diseases such as measles, mumps, and whooping cough still threaten many children because only one-half of them are adequately immunized before the age of 2 (Health Resources and Services Administration, 1990). All these factors are detrimental to education and ultimately detrimental to society as a whole. Improved health care delivery systems are mandatory if education itself is to improve.

Integrating Primary Health Care Services with Other Comprehensive Children's Services in Schools

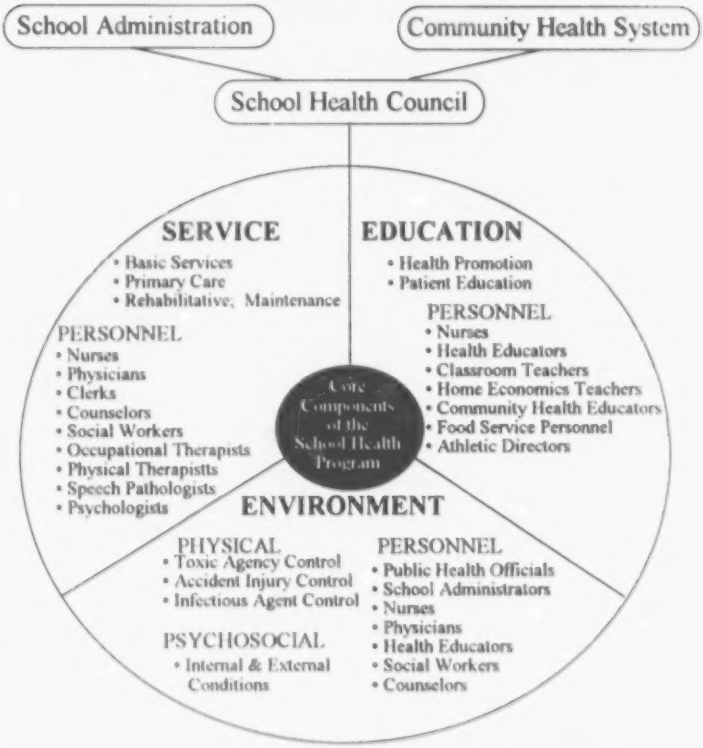
A variety of factors have moved primary health care services closer to schools and in some instances on site. Lack of access to care in the community, consumer failure to use community health facilities, the deteriorating health status of students, and the impact of poor health on learning are perhaps the most compelling reasons. In addition, the onset of a school health services reform movement has created a climate for change. Traditionally, health problems that have occurred at school have not been diagnosed and treated on site. Instead, students are referred to outside agencies for problem resolution. Unfortunately, noncompliance or the failure to follow through with an appointment for health care is common, especially among the poor, for whom access to health care is a serious problem. When primary health care is school-based, the problem resolution rate has been reported to be as high as 96% (Meeker, DeAngelis, Berman, Freeman, & Oda, 1986). Time away from the classroom is shortened. Students seek help sooner.

School policy, financing difficulties, school nurse practitioner shortages, and initial concerns from the medical establishment about the quality and continuity of care are some of the issues that required careful investigation before the widespread delivery of primary health care in schools could become a reality. Currently, the development of primary health care centers in or at least near schools is accelerating because of the successful outcomes from pilot demonstration projects throughout the country. As school and community health planners support the introduction of more primary health care into schools, this service needs to be carefully intertwined with the other school health activities to avoid unnecessary duplication, fragmentation, and the creation of professional turf issues.

Presently there is no special definition of school health to which all the various professions and organizations involved in this field subscribe. However, there is general consensus that school health programs are composed of three major functional areas: health services, health education, and environmental health (see Table 2). It is also customary for school health programs, like public health programs, to concentrate on services for groups of students rather than individuals, whereas primary health care is a service for individual students.

Most school health programs involve case finding and referral services for health problems, screening and follow-up for vision and hearing deficits, emergency care, health instruction and comprehensive health promotion programs to improve life-style habits, individualized treatment plans and complex nursing care for students with special health needs, and student assistance programs to prevent substance abuse. Environmental health and safety efforts include asbestos abatement, noise control, lighting surveillance, and special measures to reduce violence and create a positive social climate for learning.

Table 2
Nature of the School Health Program



Generally, the tripartite components of school health are organizationally and programmatically separate from one another except in smaller districts where one individual, often the school nurse, is responsible for the entire program. Furthermore, school health activities are frequently separate and apart from other comprehensive services for children such as drop-out prevention programs, special education, and family resource centers. Finally, all of these school-based services are often isolated from primary health care services provided to children and youth through community facilities outside the school.

Inherent to this effort of forging a comprehensive school health program is improved communication, understanding, and team building between all the disciplines involved. The nature of all the services provided needs further clarification so that each and every component can be woven together into an integrated whole. Among the various position papers and reports related to the issues of primary health for children and youth and fragmented services,

Expanding School Health Services to Serve Families in the 21st Century (Igoe, Giordano, 1992) is especially useful because it proposes for the first time particular roles and functions for the various health professionals involved and describes programs that would integrate primary health care services within the school health service component of the school health program (see Table 3).

In addition to role clarification and delineation and sharing of tasks, other factors related to the actual process of team development are equally important in creating an integrated school health program that eventually can be consolidated into a larger overarching comprehensive service system for children. Dunkle (1991) has identified a number of these process variables that deserve attention if integrative efforts are to succeed:

- Working partnerships must have a common definition of the recipient of the services.
- A common language must be developed and professional jargon avoided.
- Partnerships should strive for generic language and avoid the use of acronyms.
- A common understanding of the organizational structure of the agencies and institutions involved in a partnership must be developed.
- Interdependence is essential in maintaining partnerships.
- Leadership and involvement of key personnel make the difference in successful partnerships.
- Support from the top sets the tone and provides sanctions that either reward or squelch collaboration.
- *Information disarmament* requires sharing, rather than withholding, information.
- Preventing problems must become a priority and must be rewarded.
- Credibility and visibility must be shared.

School health councils have been recommended as a specific coordinating mechanism for facilitating the integration of community primary health care services and school health. School health councils consist of the persons responsible for school health: nurses, social workers, health educators, risk management personnel, teachers and, of course, school administrators. In addition, community health professionals; parents; city planners; and representatives from business, the health insurance industry, voluntary health organizations, and social services, are frequently included. The goal is to develop a comprehensive school health program that is well coordinated within the school system, that is responsive to the health needs of students while at school, and that is linked to both the private and public community health systems.

Table 3
Role Changes in School Health
Staff Roles in Old and New School Health Programs

OLD ROLES	PHYSICIAN	TRADITIONAL SCHOOL NURSE
POPULATION SERVED: 4-9 YR. TO 18 YR.		
FUNCTIONS	• Pediatric Consultation • Physical Exam • Immunizations (Mantoux) • Medical History • Interview • Problem-Oriented Medical Record • Problem Case Management • Anticipatory Guidance • Acute Care Diagnosis and Treatment	• Counseling • Health Education • Screening Tests • Follow-up • Health Room: First Aid, Triage, Referral • Clerical • Assist at Physical Exam

NEW ROLES	PEDIATRICIAN/FAMILY PHYSICIAN	NURSE PRACTITIONER	NURSE PRACTITIONER SCHOOL NURSE	HEALTH CLERK
FUNCTIONS	• Pediatric Consultation	• Physical Exam • Anticipatory Guidance • Acute Care Diagnosis and Treatment	• Counseling • Follow-up • Screening • Health Education • Manager and Coordinator of Client Care • Immunizations (Mantoux) • Nutrition Assessment • Lead Levels, Hemoglobin, Hematocrit, Urinalysis, etc. • Provision and/or Supervision of Physical Health Care Procedures for Chronically Ill and Technology Dependent Students • Supervision of Clerical and Paraprofessional Personnel • Employee Wellness Programs	• Health Room: First Aid, Triage, Referral • Clerical • Assist at Physical Exam
POPULATION SERVED: 0 YR. TO 22 YR.				

Source: Adapted from *Redesigning School Health Services*, Annette Lynch, M.D., D.P.H., 1983, p. 205.

Primary Health and School Services Demonstrations

Both government and private foundations have fostered the development of a number of innovations in the organization and delivery of school health services for school children and their families. DeFriese et al. (1991) identified the need for national leadership to focus on the need for comprehensive school health programs, to adopt comprehensive health education curricula, to provide staff development for educators, and to ensure inclusion of school-based health services linked to community-based health and social services.

During the 1992 session of the United States Congress, two proposals reflected the interest of federal lawmakers in promoting comprehensive school health services. As part of comprehensive health and school services, Senator Edward M. Kennedy of Massachusetts introduced the "Comprehensive Services for Youth Act of 1992." The proposed legislation would provide grants for local community partnerships that would develop and implement comprehensive health and social services focused on schools. The bill would also provide training and technical assistance so teachers and school administrators could take advantage of school and community-based services. Congressmen David Price of North Carolina and Ron Wycker of Oregon proposed "The Ready to Learn Act of 1992." The bill would help state and local groups devise specific solutions—including health interventions—to prepare young children for success in school. The bill would encourage health providers and educators to work together to fill gaps in health care and to coordinate services.

Private foundations have supported a number of comprehensive school-based health initiatives to increase access to basic health care services and serve children with special health care needs. The challenges of declines in federal funding have shifted more responsibility for child health services to the states (Beachler, 1991). Philanthropic support has fostered the development of local and state efforts to address the health care needs of school-age children. The Robert Wood Johnson Foundation and the W. K. Kellogg Foundation have played major roles in this area. Currently, the Johnson Foundation has launched a nationwide initiative, "Making the Grade," to expand school-based student health centers through policy reform at state and local levels.

The University of Illinois School of Nursing in Chicago is implementing and directing a collaborative effort to provide basic health care services to elementary school children in underserved areas of the city. The university's medical, dental, public health, and social work schools are working with the School of Nursing leadership and schools and community agencies to identify health and social service needs of elementary school children and their families, link children and their families to existing services, and fill gaps in health care services. With funding from the Robert Wood Johnson Foundation and the W. K. Kellogg Foundation, this project is a model for the leadership

role universities can play in the organization and delivery of comprehensive health services.

Boston Children's Hospital has piloted and is replicating a model program for children's hospital leadership in meeting the special health care needs of technology-dependent children in schools. With support from the Robert Wood Johnson Foundation, the resources and expertise of Boston Children's Hospital have been linked with health and educational programs in the Boston City Schools to provide skilled services, care coordination, and creative financing for children with complex medical needs. Children needing assisted ventilation, medication administration, catheterization, and tube feedings are, for example, able to attend regular classes with support, care, and service coordination by specially prepared nursing personnel. The project will be replicated in a number of sites across the country. The Centers for Disease Control, Division of Adolescent and School Health, has also launched a number of efforts to foster collaboration between state departments of health and education in a number of states including Wisconsin, Florida, and West Virginia.

The Impact and Implications for School Personnel

Given the increased access to primary health care services at or near school in the future and more frequent opportunities for school personnel and health care providers to interact and collaborate, what can school staff and administrators expect? The following outcomes are likely:

- There should be less difficulty in obtaining health information about students, provided health professionals help students and parents realize the value of sharing certain health data.
- With increasing exposure to educators and social service personnel, the health care providers' perspective will adjust so that they explain health problems more broadly in terms of the impact of the disorder on the students' overall functional ability and the implications of the condition and treatment plan on classroom performance and peer interaction.
- With a well-integrated comprehensive children's system in which school personnel are active participants, there will be less duplication of services and, consequently, less disruption during class time to deliver health services.
- As more diagnosis and treatment become available at school, students will spend less time away from school for health care appointments. There will be fewer unnecessary exclusions from school. Problems should be recognized sooner and resolved with greater frequency. Students with chronic disease properly monitored at school will have fewer absences.

- Health promotion programs for the entire student body and staff will have a positive effect including a reduction in injuries; improved nutritional practices, perhaps resulting in improved cognitive processing for some students; and a growing school-wide commitment to feel fit and perform up to capacity.
- School nurses will become more clinically adept and actively involved in the delivery of primary health care, in preparation of health assistants, and in case management of students with complex health needs.
- School health policies will improve and will reflect the customary and usual practice of the rest of the community health system.
- Financing for school health will be integrated into community, state, and national plans for child and adolescent health.
- Individualized health plans for students with special health needs will increase in number and be more relevant for school settings.
- More personnel will become available from other fields to assist teachers in directly dealing with the complex problems students bring to school each day.

Comprehensive children's services in schools also present health providers, educators, social workers, and others with new responsibilities if they are to provide what has been defined elsewhere as a seamless set of services. Among the changes that are needed are:

- Shared governance of these programs at an administrative level with visionary leadership.
- Cross-training of personnel so that teachers, nurses, and social workers can comfortably and competently practice in certain areas of one another's professional domains.
- Coordinated, automated data management systems that enable students to receive services in various locations and that assist administrators in profiling the needs of the student body as well as the impact of programs in managing and resolving these needs.
- Adoption of new viewpoints among health care providers and others that will foster self-reliance among children and families in dealing with their own health matters.
- A genuine commitment for change and an appreciation from an administrator's point of view that time is required to create positive change. Consequently, personnel cannot be transferred annually to new locations and assignments because this sort of musical chairs stymies team development and interferes with the evolution of an integrated comprehensive children's program.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Beachler, M. (1991). Improving health care for underserved infants, children and adolescents—The Robert Wood Johnson Foundation's experience. *American Journal of Diseases of Children, 5*(135), 565-568.

Behrman, R. E. (Ed.). (1992). *The future of children, 2*(1). Center for the Future of Children.

DeFriese, G. et al. (1991). Comprehensive school health. *The Education Digest, 3*, 42-45.

Dunkle, M. (1991). Building child service partnerships. *Children and Teens Today, 12*(3), 5-6.

Health Resources and Services Administration, Office of Maternal and Child Health Services. (1990). *Child health USA '90*. Rockville, MD: Author. ED 331242

Igoe, J. B., & Campos, E. L. (1991). Report of a national survey of school nurse supervisors. *School Nurse, 7*(4), 8-20.

Igoe, J. B., & Giordano, B. P. (1992). *Expanding school health services to serve families in the 21st century*. Washington, DC: American Nurses Association.

Klerman, L. (1988). School absence—a health perspective. *Pediatric Clinician of North America, 35*, 1253-1269.

Lampe, D. (1992). Healthy communities: Proposed state level health care reform plans seek to reduce costs and increase access. In D. Lampe (Ed.), *National civic review* (174-178). Denver: National Civic Review.

Lear, J. G., Gleicher, H. B., St. Germaine, A., & Parter, P. J. (1991). Reorganizing health care for adolescents: The experience of the school-based adolescent health care program. *Journal of Adolescent Health, 12*(6), 450-458.

Meeker, R. J., DeAngelis, C., Berman, B., Freeman, H. E., & Oda, D. (1986). A comprehensive school health initiative. *Image: Journal of Nursing Scholarship, 18*(3), 86-91.

National Health/Education Consortium. (1992a). *Creating sound minds and bodies: Health and education working together*. Washington, DC: Author. ED 352362

National Health/Education Consortium. (1992b). The relationship of health to learning: Healthy brain development. In H. M. Wallace, K. Patrick, G. S. Parcel, & J. B. Igoe (Eds.), *Principles and practices of student health*. Oakland, CA: Third Party Publishing Company.

Ramey, C. T., & Ramey, S. L. (1992). *At risk does not mean doomed*. Washington, DC: National Health/Education Consortium. ED 349102

Starfield, B. (1982). Family income, ill health and medical care of U.S. children. *Journal of Public Health Policy, 3*(3), 244-259.

XIV

Evaluation of Coordinated Children's Services: A Collaborative, Participatory Approach

Rebekah A. Levin
Jennifer C. Greene

In response to a pervasive sense of frustration about our inability to affect the lives of inner-city children who are confronted with the multiple threats of poverty, an increasing number of universities have undertaken joint programs with local urban schools to see if they could be more successful in addressing these children's needs. These programs incorporate an ecological approach to child development, by addressing issues such as school environment, teachers' professional growth, student health status, parenting skills, and youth activities, in recognition of the interconnectedness of the multiple individuals with whom youth interact and environments in which they operate. Such programs involve the participation of a far wider group of individuals and educational, health, social, and political organizations than has previously occurred.

At the same time that programs are expanding to be more ecological in their approach to addressing children's needs, there is an effort to engage in collaboration, both in program design and implementation. The motivation for collaborative efforts rests in a belief in the value of involving the various individuals who will either be needed to implement the intervention or will themselves be the targets of the intervention. In doing so, programs will be developed that do a better job of taking into account the needs, abilities, and limitations of all participants, and thus engender a greater investment in and commitment to the program.

Collaboration also has the potential of strengthening programs by tapping into the knowledge bases, experiences, and perspectives of various individuals and groups who traditionally function in significantly different arenas, but who may be brought together by the program. In coming together, the participating bodies do not traditionally merge into a single organization, but

establish a common goal or set of goals towards which each of them will work. Each stakeholder in the collaborative system is allowed, or more accurately, expected, to have a greater voice in the design and implementation of the project than would be allowed for in a more traditional, hierarchical control model.

What this leads to is a project environment that is often in flux, changing to address the needs and desires of a wide cadre of participants. Program content, expectations, mandates, participants, implementors, and administrators all may change as an outcome of the collaborative process. Though programs may be stronger and more well-tuned to the needs of the particular situations in which they exist, they tend to create unpredictable systems of operation that can feel unsettling to the participants. This type of project environment closely parallels Weick and McDaniel's description of organic systems as "restless organizations where there is a continuous search for definition, information and meaning . . . [which are] better able to sense the complexities in the environment of non-routine information it faces . . . at the cost of composure" (Weick & McDaniel, 1989, p. 347).

Such programs or projects that encompass coordinated children's services from multiple disciplines and incorporate a collaborative model of intervention lead to an evaluation environment that differs significantly from that traditionally proscribed by single-axis, top-down interventions. King and Pechman provide an encompassing pictorial description most appropriate to this situation with their postmodern evaluation context, in which evaluators and users coexist in an inner loop of collaboration, together raising questions, creating understanding, and assigning meaning to events. However, this enterprise takes place within a context of chaos, brought about by changing content, changing mandates, changing populations, new technologies and methodologies, new layers of organizations and management, information overload, and other random forces just waiting for the opportunity to affect the program (King & Pechman, 1991, p. 4). This fluctuating, chaotic environment makes it extremely difficult for any single individual to "know the context" of the environment in which program implementors or evaluators try to "weave their framework" of understanding (Sarason, 1971, p. 122). Evaluation in this context thus becomes a process for sharing among multiple knowers rather than a means for a single source to generate the answers.

Evaluation Parameters for Coordinated Children's Services

Given this complex and often chaotic environment that accompanies coordinated children's services, evaluations can serve to address two areas of inquiry. The first area, commonly referred to as *outcome* or *summative* evaluation is designed to answer the questions, "Did the program work? Was

the project effective in bringing about the desired results? Was the intervention worth the time and money that it required?" In looking back over the development of a knowledge base in education, social work, psychology, and the physical sciences, we have repeated examples of well-intentioned innovative interventions, which not only felt right to the practitioner, but often were believed by their clients to be appropriately and adequately addressing the presenting needs and situations. And yet in hindsight, it is clear that many of these interventions were not only ineffective, but often times were destructive, despite the impressions of those most closely involved in them. Outcome evaluation also addresses the issue of cost. Programs that bring multiple services and service providers together, requiring them to not only coordinate their efforts, but establish mutually acceptable goals for the project as a whole, require extensive outlays of time by an ever-increasing number of participants. Bureaucracies are created and expanded that cost money to maintain. These outlays of time and money could be spent elsewhere. Teachers who meet weekly after school to design alternative school organizational structures, social workers and nurses who jointly plan a family health and welfare program, parents who staff a youth drop-in center, all could use the time from these activities to meet other needs of their own, their children, their students, or the community. Information from outcome evaluations can help participants and those who are funding them make decisions as to the value of their efforts.

The second area of concern to evaluation focuses on the process of project implementation and development and is designed to answer the questions, "How is the project going? Are clients receiving services? Are the procedures that were initially designed for administration, communication, and/or budgeting meeting the project participants' needs?" This type of inquiry, referred to as *process* or *formative* evaluation is of particular importance when carrying out projects involving collaboration among children's services. Although a large conglomerate of programs are often available and in use by children and their families within a single school district, it is unusual for coordination to exist between the services, and even more rare for projects to have expectations for collaboration among the services, agencies, and organizations. The procedures developed at the start of (or before) program implementation to facilitate coordination and collaboration are frequently untried mechanisms that need to be fine-tuned and occasionally, completely reworked once they have been implemented.

Guba and Lincoln's depiction of the multiple roles of collaborative inquirers well suits process evaluations of coordinated children's service (1985). The evaluator, first of all, is a learner, responsible for "eliciting the claims, concerns, and issues in the minds of a variety of stakeholding audiences" (p. 4). Not all program participants are comfortable with the notion of presenting their own opinions. An evaluator who can clearly communicate the importance and value of such input encourages and supports such involvement.

"(W)hen it comes to judgements, we are reasonably proficient about rendering our own, but we don't know much about helping people who are stakeholders and targets form their own informed and balanced judgements" (Lincoln, 1990, p. 8). Fremming refers to this as a bubble-up method of evaluation, ensuring that the voices of all participants are heard, including "organizational non-elites," which serves to "institutionalize organizational perspectives different from those held by management (Fremming, 1991, p. 25-26), and in the case of coordinated services, ensures that the voices of competing management layers also are heard.

A second role of the evaluator in process evaluation is that of a teacher, reflecting back to the participants their own vision of the program as it currently exists and the directions that they see it moving, as well as the perspectives held by the other participants. This mechanism in itself creates new understandings and conceptions of what the program can and should be. These and other key attributes of meaningful evaluations of coordinated children's services are well represented in an approach to evaluation that itself is participatory and collaborative. This approach is described and then contextualized and illustrated for coordinated children's service programs.

Participatory Program Evaluation

Participatory approaches to program evaluation intentionally involve diverse program stakeholders in a collaborative inquiry process that enables the joint, mutual construction and ownership of meaningful, contextually important knowledge and that engenders the capacity to act on that knowledge. Participatory inquiry is justified on ethical, normative, and political grounds, with support from political theorists and philosophers (e.g., Barber, 1984, 1988; Bernstein, 1983; Bellah, Madsen, Sullivan, Swidler, & Tipton, 1975; Sullivan, 1986). With this rationale, participatory inquiry loftily aims for some kind of democratizing change in the inquiry setting. With such aims, the practice of participatory evaluation more concretely emphasizes its process (Whitmore, 1990), which must also be democratic. In essence, this means that all key stakeholder groups have a meaningful and equal voice in decisions about the focus, procedures, and implications of the evaluation. A participatory evaluation process is one in which all key program constituencies are represented; the leadership and decision authority for the evaluation is shared; interactions regarding evaluation decisions are guided by norms of reciprocity, respect, and caring; and decisions themselves are guided by norms of equity and justice.

Participatory program evaluation approaches have evolved from several ongoing strands of methodological development. One important influence from within the domain of social program evaluation, is its responsive

tradition (Stake, 1975; followed by Guba & Lincoln, 1981, 1989; among others). In this tradition, evaluation practice focuses on responding to the information needs or the concerns and issues of members of the setting being evaluated, rather than addressing theoretical issues or remote policymakers' questions. A necessary step in responsive evaluation approaches is thus the involvement of key program stakeholders in determining the priority questions for the evaluation.

A second important influence on participatory evaluation is the utilization emphasis in evaluation theory and practice, spearheaded by Michael Patton (1986) over the past 2 decades. This strand of analytic and empirical work also underscores the importance of stakeholder involvement in evaluation studies for the subsequent usefulness and actual use of evaluation results. From these first two influences, participatory approaches to evaluation are advocated principally for their potential to promote participant involvement in, ownership of, and hence meaningful utilization of inquiry findings (Gold, 1983; Greene, 1988; Patton, 1986).

More broadly and importantly, such approaches are advocated because they are right, just, and ethically defensible (MacDonald, 1978; McTaggart, 1990) and because they constitute a viable vehicle for participant empowerment and social change (Brunner & Guzman, 1989; Weiss & Greene, in press; Whitmore, 1988; Whitmore & Kearns, 1988). Participatory inquiry in this broader construct is especially directed toward giving voice and promoting change for those in the inquiry setting with least access to power and resources—the marginalized, the silenced, the oppressed. Moreover, this broader construct reflects a third critical influence on the emergence of participatory evaluation, namely, the recent normative turn in social science inquiry philosophy. Reasoned arguments for the inherent value bases of social scientific inquiry, and hence for the inevitability of political and ideological agendas for inquiry, have been voiced by many philosophers and methodologists (e.g., Bernstein, 1983; c. Weiss, 1987). For participatory approaches to program evaluation, this has all translated into a strong justification for the democratic vales underlying participation.

These three influences have coalesced into a strong, defensible conceptual framework and justification for participatory approaches to social program evaluation. The practice of participatory evaluation, however, remains less well developed. Among the challenges for participatory evaluation practitioners are the following. First, participatory evaluators seek not just the representation of stakeholder interests and concerns, but also change-oriented reflection and action on those interests. Such action requires anchoring the study in existing structures of power and opportunity, and securing the involvement of those with existing authority and control over resources (Greene, 1991). Yet, developing this kind of structural, not just individual, capacity for action remains an underdeveloped aspect of the participatory model.

Second, the pressure to succeed—to find that these programs have had the expected effects at measurable and significant levels over short time frames—frequently leads those accountable for project administration and sponsorship to feel a need to show that the project is working and should be continued, rather than engage in the kind of reflection and modification needed for improvement (Clark & LoConte, 1991). Third, an important practical challenge in participatory evaluation is the substantial time it demands of participating stakeholders. Few stakeholders can allocate the countless hours required by a process that is genuinely democratic; this is especially so for key stakeholder groups like program staff and intended beneficiaries, whose lives are already full.

Although participatory program evaluation and the role of the evaluator that it encompasses could be of significant benefit to projects engaged in the type of coordinated children's services as described earlier, tradition and expectation regarding the role of evaluators can act as impediments to its successful implementation. The role of participatory evaluator appears to have inherent conflicts, for example, between responsiveness and proactivity, between facilitation and social critique, between stepping out of the way of stakeholders' own collaborative process and safeguarding the essential democratic principles framing this process (Cocchini, 1991).

All too often, the pressure for evaluation to demonstrate early success of programs is accompanied by an expectation that the evaluator is there to function as a source of data for publicity. Although there is nothing wrong with publicizing early results from interventions, if that gets in the way of honest reflection about the program's functioning it can lead to significant stress for the participants and program dysfunction. "Publicity is not evaluation . . . the task is not evaluation in the narrow sense, but development of an organizational culture that makes self-correction a norm and not a war" (Sarason, 1971, p. 129).

In their role as educators, evaluators are not infrequently in a position to reflect back to decision makers "potentially unpopular conclusions" (Fremming, 1991, p. 6). However, when organizations or projects have an investment in preserving the status quo, pressures to co-opt the evaluator to the role of professional cheerleader increase. "The organization which controls the salary and continued employment of the evaluator, may expect her to downplay negative findings, causing the evaluator to balance professional objectivity and organizational loyalty. . . . The internal evaluator can come under the jurisdiction of upper management or become a public relations tool of administrators" (Torres & Piontek, 1991, p. 4).

Nonetheless, a strong argument can be made for incorporating participatory strategies within the repertoire of approaches used to evaluate comprehensive, coordinated children's service programs. Participatory evaluation and coordinated service programs for children share a common value base and a

common agenda of giving voice to the experiences and perspectives of program participants and staff, toward their meaningful involvement in processes that enhance individual empowerment, collective dialogue, and community social change (Weiss & Greene, in press). Joining participatory evaluation with coordinated children's service programs thus offers enormous potential for the mutual enhancement of common goals. A participatory evaluation constitutes a process that is consonant with program means and a vision that is congruent with program ends and thereby can serve to augment them.

The following two vignettes illustrate ways in which participatory evaluation methods have been incorporated into coordinated children's services programs.

• The Sullivan Middle School Evaluation Team assembled for its bimonthly meeting in the school library, and student, teacher, and administrative members of the team were relieved of their regular responsibilities for the afternoon. With parent and community representatives, team membership totalled 12, 10 of whom were present this day in addition to the 2 outside educators.

The evaluation team's primary agenda for this meeting was to continue their deliberations about priority questions for the planned evaluation of the school's new community-based mentoring program. This program, which involved partnerships with the local university and several youth agencies, was designed to promote positive, social development for youth with inadequate role models and relationships. With the aid of the two outside evaluators, a wide array of program concerns and issues had been collected from diverse stakeholders. These included program design and implementation questions like, "On what characteristics would mentors and mentees be matched?" and "What criteria would be used to judge the quality of the mentoring relationship?" Other stakeholders were more interested in program outcomes, for example, "How effectively does the program deter youth from involvement in detrimental activities?" and "What is the meaning and significance of the program for youth?" The evaluation team had spent their last meeting in an open discussion of these program concerns and issues. Their task for this meeting was to select and refine the priority concerns for the evaluation and to begin to outline a design and methodology for the priorities identified.

• In order to assess the impact of the Nation of Tomorrow (TNT) project in the four communities, a series of focus groups were held at each school, moderated by the Family Advocates (community members who were hired by the project to design and implement programs for youth and their families). (See chapter IX for a description of the project.) The project evaluator initially met with the university faculty members who direct the project's components to suggest the focus group format and get input regarding the topics to be addressed in the groups. The evaluator then met with the family advocates to

further develop and refine the topics. Each set of family advocates then modified the topics to address any specific concerns or issues that had arisen in their community.

Just as the evaluator's needs to gather data informing participants about program impacts had to be flexible enough to allow family advocates room to address issues of particular relevance to them, the advocates' training as group facilitators emphasized the importance of allowing focus group participants room to steer their discussions in ways that allow their voices and perspectives to be heard.

Once completed, transcripts of the focus group discussions were made and used to provide feedback to project participants on community members' perceptions of their community, school, and families, as well as of the project itself, which resulted in future modifications to program implementation.

Whether or not these coordinated children's service efforts are any more successful than previous undertakings in educational settings at serving the needs of urban youth is uncertain. They unquestionably call for a different type and greater level of interaction and involvement on the part of all participants, and thus may have the potential for creating significant and lasting change. As evaluators, it is critical that we move beyond the role of outside analysts providing quick and dirty (or even slow and clean) analysis of the data traditionally associated with educational evaluation. It is part of our role to look beyond what worked and what failed to understand the dynamics of why. To do this, we ourselves will have to be willing to engage in the messy and often times uncomfortable business of collaboration to inform the process in a far more meaningful way than we could achieve without it.

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information, contact the ERIC Clearinghouse on Teaching and Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 0036-1186; (202) 293-2450.

Barber, B. (1984). *Strong democracy: Participatory politics for a new age*. Berkeley, CA: University of California Press.

Barber, B. (1988). *The conquest of politics: Liberal philosophy in democratic times*. Princeton, NJ: Princeton University Press.

Bellah, R. N., Madsen, R., Sullivan, W. J., Swidler, A., & Tipton, S. M. (1975). *Habits of the heart*. Berkeley, CA: University of California Press.

Bernstein, R. J. (1983). *Beyond objectivism and relativism*. Philadelphia: University of Pennsylvania Press.

Brunner, I., & Guzman, A. (1989). Participatory evaluation: A tool to assess projects and empower people. In R. F. Conner & M. Hendricks (Eds.), *International innovations in evaluation methodology. New directions for program evaluation 42* (pp. 9-18). San Francisco: Jossey-Bass. See EJ 396091

Clark, S. B., & LoConte, J. P. (1991, October). *When control groups do not exist: Program evaluation without a net*. Paper presented at the annual meeting of the American Evaluation Association, Chicago. ED 338716

Cocchini, M. (1991). *What is it we are about when we engage in evaluation?* Unpublished manuscript, Cornell University, Ithaca, NY.

Fremming, J. (1991). *Balancing needs for internal and external evaluation: Case studies from federal agencies*. Paper presented at the annual meeting of the American Evaluation Association, Chicago.

Gold, N. (1983). Stakeholders and program evaluation: Characterizations and reflections. In A. S. Bryk (Ed.), *Stakeholder-based evaluation. New directions for program evaluation 17* (pp. 63-72). San Francisco: Jossey-Bass. EJ 280327

Goodlad, J. I. (1987). *The ecology of school renewal*. Eighty-sixth yearbook of the National Society for the Study of Education, Part I. Chicago, IL: University of Chicago Press. ED 305742

Greene, J. G. (1988). Stakeholder participation and utilization in program evaluation. *Evaluation Review, 12*(2), 91-116. EJ 374436

Greene, J. G. (1991, October). *Responding to evaluation's moral challenge*. Paper presented at the annual meeting of the American Evaluation Association, Chicago.

Guba, E. G., & Lincoln, Y. S. (1981). *Effective evaluation*. San Francisco: Jossey-Bass.

Guba, E. G., & Lincoln, Y. S. (1985, Summer). Fourth generation evaluation as an alternative. *Educational Horizons*, 139-41.

Guba, E. G., & Lincoln, Y. S. (1989). *Fourth-generation evaluation*. Newbury Park, CA: Sage.

Jackson, P. (1988). *Contributing to educational change*. Berkeley, CA: McCutchan Publishing Company.

King, J. A., & Pechman, E. M. (1991). *Models of evaluation use*. Presented in dialogue-form at the annual meeting of the American Evaluation Association, Chicago.

Lincoln, Y. S. (1990, October). *The arts and sciences of program evaluation: A moral tale for practitioners*. Presidential Address at the annual meeting of the American Evaluation Association, Boston.

MacDonald, B. (1978). *Democracy and evaluation.* Norwich: Centre for Applied Research in Education, University of East Anglia.

McTaggart, R. (1990, April). *Dilemmas in democratic evaluation: Politics and validation.* Paper presented at the annual meeting of the American Educational Research Association, Boston. ED 322646

Patton, M. Q. (1986). *Utilization-focused evaluation, second edition.* Beverly Hills, CA: Sage.

Sarason, S. B. (1971). *The culture of the school and the problem of change.* Boston: Allyn and Bacon.

Schlechty, P. C. (1990). *Schools for the twenty-first century: Leadership imperatives for educational reform.* San Francisco: Jossey-Bass. ED 319128

Stake, R. E. (1975). *Evaluating the arts in education: A responsive approach.* Columbus, OH: Merrill.

Sullivan, W. M. (1986). *Reconstructing public philosophy.* Berkeley, CA: University of California Press.

Torres, R. T., & Piontek, M. (1991). *What do we know about the differences: Use for internal and external evaluation.* Paper presented at the annual meeting of the American Evaluation Association, Chicago.

Weiss, C. H. (1987). Where politics and evaluation research meet. In D. J. Palumbo (Ed.), *The politics of program evaluation* (pp. 47-70). Newbury Park, CA: Sage.

Weiss, H. B., & Greene, J. C. (in press). An empowerment partnership for family support and education programs and evaluations. *Family Science Review.*

Whitmore, E. (1988, October). *Evaluation and empowerment: A case example.* Paper presented at the annual meeting of the American Evaluation Association, New Orleans.

Whitmore, E. (1990, October). *Participatory evaluation: It's the process that counts.* Paper presented at the annual meeting of the American Evaluation Association, Boston.

Whitmore, E., & Kearns, P. (1988). Participation, empowerment, and welfare. *Canadian Review of Social Policy, 22,* 51-60.

Weick, K. E., & McDaniel, R. R. (1989). How professional organizations work: Implications for school organization and management. In T. J. Sergiovanni & J. H. Moore (Eds.), *Schooling for tomorrow: Directing reforms to issues that count.* Needham Heights, MA: Allyn and Bacon.

Contributors

Lourdes B. Afable
Chicago Public Schools
1819 W. Pershing Road
Chicago, IL 60609

Mary Bay
University of Illinois at Chicago
College of Education (M/C 147)
Box 4348
Chicago, IL 60680

Richard P. Brinker, Ph.D.
[Deceased]

Colleen A. Capper
University of Wisconsin at Madison
Education Sciences Building
1025 W. Johnson Street
Madison, WI 53706

Victoria J. Chou
University of Illinois at Chicago
College of Education (M/C 147)
Box 4348
Chicago, IL 60680

Robert L. Crowson
Peabody College at Vanderbilt University
Department of Educational Leadership
Box 514
Nashville, TN 37203

Beatrice S. Fennimore
Indiana University of Pennsylvania
6545 Dalzell Place
Pittsburgh, PA 15217

Shirley A. Girouard
North Carolina Center for Nursing
3203 Woman's Club Drive
Wake Building - Suite 217
Raleigh, NC 27612

Sally G. Goren
University of Illinois at Chicago
College of Social Work (M/C 309)
Box 4348
Chicago, IL 60680

Jennifer C. Greene
Department of Human Service Studies
MVR Hall
Cornell University
Ithica, NY 14853

Mary T. Hall
Simon Fraser University
College of Education
Burnaby, British Columbia V5A 1S6

Judith B. Igoe
4200 E. 9th Avenue
Office of School Health Programs C-287
University of Colorado Health Services Center
Denver, Colorado 80262

Barbara A. Intriligator
University of Hartford
College of Education
Nursing and Health Professions
Hillyer Hall-Room 212
West Hartford, CT 06117

Richard A. King
University of Northern Colorado
College of Education
Greeley, CO 80639

Sabrina Hope King
University of Illinois at Chicago
College of Education (M/C 147)
Box 4348
Chicago, IL 60680

Roberta B. Knowlton
School Based Youth Services Program
Department of Human Services
State of New Jersey, CN700
Trenton, NJ 08625

Rebekah A. Levin
University of Illinois at Chicago
College of Education (M/C 147)
Box 4348
Chicago, IL 60680

Michael E. Manley-Casimir
Simon Fraser University
College of Education
Burnaby, British Columbia V5A 1S6

Claire E. Smrekar
Peabody College at Vanderbilt University
Department of Educational Leadership
Box 514
Nashville, TN 37203

Mark A. Smylie
University of Illinois at Chicago
College of Education (M/C 147)
Box 4348
Chicago, IL 60680

Edward H. Tetelman
Office of Legal and Regulatory Affairs
Department of Human Services
State of New Jersey, CN700
Trenton, NJ 08625

James G. Ward
University of Illinois at Urbana-Champaign
College of Education
1310 South Sixth Street
Champaign, IL 61820

Kathryn S. Whitaker
University of Northern Colorado
College of Education
Greeley, CO 80639

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AMERICAN ASSOCIATION OF COLLEGES FOR
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